

LAC DPH Health Alert: Meningococcal Vaccine Now Recommended For All Men Who Have Sex With Men (MSM)



July 26, 2016

This message is intended for primary care, HIV, infectious disease, emergency medicine, and urgent care providers.

Please distribute as appropriate.

Key messages

- An outbreak of invasive meningococcal disease (IMD) among men who have sex with men (MSM) continues in Southern California.
- Meningococcal vaccine recommendations have been expanded to include ALL MSM regardless of risk and HIV status.

Situation

On June 24, in response to an increase in IMD among MSM living in Southern California, the Los Angeles County (LAC) Department of Public Health (DPH) reiterated its previous recommendation for meningococcal vaccination for MSM who are HIV-positive or who engage in behaviors that could increase their risk of infection.

Since that communication, the Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) have assisted LAC DPH and other affected counties/cities with the investigation and management of this outbreak. After analysis of the information to-date related to this increase in IMD cases, LAC DPH, in conjunction with the County of Orange Health Care Agency and City of Long Beach Department of Health and Human Services, is expanding its meningococcal vaccination recommendation to include all MSM in addition to all persons with HIV infection.

As of <u>July 25, 2016</u>, there have been 13 confirmed cases of IMD this year in LAC (excluding Pasadena and Long Beach which have separate health departments) and 7 (54%) have been among MSM. All cases survived their infection. Four of the 7 MSM cases occurred in June. In 2015, only 1 MSM IMD case was identified among a total of 12 IMD cases.

Quadrivalent meningococcal conjugate (MCV4) vaccines protect against serogroup C disease, the serogroup causing the current IMD cases among MSM, as well as against A, W, and Y disease. Although serogroup B (MenB) vaccines are now available, serogroup B has not been associated with clusters or outbreaks among MSM.

Actions Requested of Providers

- ✓ Vaccinate all MSM patients with MCV4 vaccine during this outbreak.
- ✓ Routinely vaccinate HIV-infected patients with MCV4 vaccine as per the new U.S. Advisory Committee on Immunization Practices (ACIP) recommendations.*
- ✓ Offer HIV testing along with vaccination to all MSM patients who are not known to be HIV-infected and have not been tested for HIV within the last year.
- ✓ Refer MSM patients for free MCV4 vaccine if vaccination is not feasible at their primary care provider (see below).
- ✓ Report all suspect cases of IMD immediately to LAC DPH.

*ACIP voted on June 22, 2016, to recommend that all persons with HIV infection who are two months of age and older be routinely vaccinated with MCV4 vaccine. Note: MCV4 is included on the AIDS Drug Assistance Program (ADAP) formulary.

Meningococcal Vaccine Dosing and Schedule

- MSM who are not HIV-infected should receive 1 dose of MCV4 vaccine (Menveo® or Menactra®). Because meningococcal vaccine induced immunity wanes, a booster dose can be considered for those whose last dose of MCV4 vaccine was ≥5 years ago.
- <u>HIV-infected persons</u> should receive 2 doses of MCV4 vaccine (Menveo® or Menactra®), 8-12 weeks apart, as their primary series. Previously vaccinated HIVinfected persons who received only 1 dose of vaccine should receive a second dose at the earliest opportunity, as long as it has been at least 8 weeks from first dose. A booster dose should be given every 5 years if the primary series was administered at >7 years of age.
- Although Menactra® and Menveo® are licensed for persons through 55 years of age, they may be administered to persons 56 years of age and older. See the <u>DPH</u> <u>Meningococcal Conjugate Vaccines Factshee</u>t for more information on routine meningococcal vaccine recommendations, dosing, and storage/ handling.

Free Meningococcal Vaccine at DPH and Community Clinics

LAC DPH will continue to make free meningococcal vaccine available to patients at DPH public health clinics and various other medical facilities within LA County. The location and hours of public health clinics and other medical facilities providing vaccine can be found at: http://www.publichealth.lacounty.gov/ip/Docs/meningitisclinics.pdf

Reporting and Public Health Response

All cases of IMD are immediately reportable by healthcare providers and laboratories to LAC DPH. Laboratory confirmation is not required to report. Call the Acute Communicable Disease Control Program (ACDC) at 213-240-7941 to report.

LAC DPH conducts case and contact investigations for suspect meningococcal disease reports. Preventive antibiotics are provided to close contacts of IMD cases.

Additional Meningitis Resources

For health care providers

- Providers are encouraged to call ACDC with questions regarding IMD: 213-240-7941 and the Immunization Program regarding meningococcal vaccine recommendations: 213-351-7800.
- Meningococcal Conjugate Vaccines Factsheet http://www.ph.lacounty.gov/ip/Docs/MeningococcalFactSheet.pdf
- Meningitis-resources for Health Professionals
 - CDC http://www.cdc.gov/meningitis/clinical-resources.html
 - LAC DPH http://publichealth.lacounty.gov/acd/Mening.htm
- Invasive Meningococcal Disease: Los Angeles County Epidemiology Report http://publichealth.lacounty.gov/acd/docs/IMD2016.pdf

For patients

 "Stop Before You Swap" LAC DPH meningitis and meningococcal disease resources for MSM including disease and risk-reduction information as well as vaccination locations:

http://publichealth.lacounty.gov/ip/DiseaseSpecific/dontswap.htm

This Health Alert was sent by the Acute Communicable Disease Control Program,
Los Angeles County Department of Public Health.

To view this and other communications or to sign-up to receive LAHANs, please visit http://publichealth.lacounty.gov/lahan