

LAC DPH Health Alert: Outbreak of Meningococcal Disease among adult Males in Southern California



June 24, 2016

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

Please distribute as appropriate.

Key messages

- There has been a recent increase in cases of invasive meningococcal disease (IMD) among men living in Southern California, most of whom are men who have sex with men (MSM).
- Los Angeles County (LAC) Department of Public Health (DPH) recommends meningococcal vaccine for gay/MSM at higher risk of invasive meningococcal disease (IMD) (see full LAC DPH Recommendation below).
- It is now recommended that all HIV- infected persons (≥ 2 months of age) be routinely vaccinated with the quadrivalent meningococcal conjugate (MCV4).

Situation

Since May 2016, nine confirmed cases of IMD, including one death, have been reported in men living in Southern California, most of whom are MSM. Six cases are known to be caused by serogroup C and one case is awaiting serogroup identification. Four of nine cases were among Los Angeles County male residents and five additional cases were reported from two neighboring health jurisdictions. This represents an increase above the typical number of reported cases. Most cases have occurred in the past four weeks.

As of <u>June 23, 2016</u>, there have been 9 confirmed cases of IMD this year in LAC (excluding Pasadena and Long Beach which have separate health departments) and 4 (45%) have been among gay/MSM. All cases survived their infection. Three of the 4 MSM cases occurred within the past 6 weeks. To date, public health investigation has not determined any common social linkages among the LAC gay/MSM cases nor with the other cases in the region. In 2015, only 1 gay/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 gay/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.

Because of their increased risk for IMD, the U.S. Advisory Committee on Immunization Practices (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. MCV4 is included on the AIDS Drug Assistance Program (ADAP) formulary.

LAC DPH is re-emphasizing its existing recommendation for meningococcal vaccination of both HIV-positive gay/MSM and HIV-negative gay/MSM whose activities put them at higher risk. Many cities will have Pride events this summer, and there will be many crowded venues. LAC DPH encourages health care providers to vaccinate persons in identified risk groups.

LAC DPH recommends meningococcal vaccine be offered to:

- All HIV-infected persons.
- All gay/MSM, regardless of HIV status, who regularly have close or intimate contact with multiple partners or who seek partners through the use of digital applications ("apps"), particularly those who share cigarettes/marijuana or use illegal drugs.

Actions Requested of Providers

- ✓ Recommend meningitis vaccination for all gay/MSM patients at elevated risk for IMD
- ✓ Recommend meningitis vaccination for HIV-infected patients.
- ✓ Actively communicate with potentially at-risk patients about the benefit of meningococcal vaccination.
- ✓ Offer HIV testing along with vaccination to all gay/MSM who are not known to be HIV-infected and have not been tested for HIV within the last year.
- ✓ Refer at-risk gay/MSM patients to DPH clinics for free vaccination is not feasible at a person's primary care provider (see below).

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.
- HIV-infected persons 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.

Meningococcal Vaccine at DPH Clinics

LAC DPH will continue to make free meningococcal vaccine available to patients at DPH public health clinics at various locations within LAC. Specific clinic hours have been extended on Friday evening and clinics will be open on Saturday. The location and hours of public health clinics providing vaccine can be found at: http://publichealth.lacounty.gov/ip/DiseaseSpecific/dontswap.htm.

Additional Meningitis Resources:

For health care providers

- Providers may call the Acute Communicable Disease Control Program with questions regarding meningococcal vaccine recommendations or IMD: 213-240-7941
- 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
- Meningitis and meningococcal disease including a current epidemiology summary: http://publichealth.lacounty.gov/acd/Mening.htm

For patients

 "Stop Before You Swap" LAC DPH meningitis 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 Dr. Laurene Mascola, Chief, Acute Communicable Disease Control Program, Los Angeles County Department of Public Health.

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