Meningococcal Vaccines Work Group Update

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Chair, Meningococcal Work Group
Advisory Committee on Immunization Practices
June 22, 2016



Work Group Members

ACIP Members

Lorry Rubin (Chair)
Kathleen Harriman
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Kelly Moore
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Ex Officio Members

Lucia Lee (FDA) Anuja Rastogi (FDA) Margaret Yacovone (DOD)

CDC Work Group Lead

Jessica MacNeil (CDC/NCIRD)

Liaison and Other Representatives

Carol Baker (IDSA)

Susan Even (ACHA)

Rachel Herlihy (IAC)

Nneka Holder (SAHM)

Martin Luta (CSTE)

Ruth Lynfield (AAP)

Paul McKinney (APTR)

Jeffrey Moore (AAFP)

William Schaffner (NFID)

Bill Atkinson

Mike Brady

Doug Campos-Outcalt

Richard Clover

Mary Healy

Cody Meissner

Paul Offit

Georges Peter

Revised Dosing Schedule for MenB-FHbp (Trumenba®, Pfizer Vaccines)

- Approved by FDA on April 14, 2016
- Section 2: Dosage and Administration
 - 2.1 Dose and Schedule

Three-dose schedule: Administer a dose (0.5 mL) at 0, 1-2, and 6 months

Two-dose schedule: Administer a dose (0.5 mL) at 0 and 6 months

The choice and dosing schedule may depend on the risk of exposure and the patient's susceptibility to meningococcal serogroup B disease

Today's Session

- Updates to MenB-FHbp dosing schedule
 - Discussion on potential policy options for 2-dose and 3-dose schedules
 - No vote planned
- Use of MenACWY vaccines in HIV-infected persons
 - Previous discussion at February 2016 meeting
 - Anticipate ACIP and VFC votes during this session

Policy Options

- □ Human Immunodeficiency Virus (HIV)-infected persons aged ≥2 months should routinely receive MenACWY vaccine* (Category A)
 OR
- □ Human Immunodeficiency Virus (HIV)-infected persons aged ≥11 years should routinely receive MenACWY vaccine** (Category A)

^{*}Includes MenACWY-D (Menactra®), MenACWY-CRM (Menveo®), and Hib-MenCY-TT (MenHibrix®) **Includes MenACWY-D (Menactra®) and MenACWY-CRM (Menveo®)

Policy Options

- □ Human Immunodeficiency Virus (HIV)-infected persons aged ≥2 months should routinely receive MenACWY vaccine* (Category A)
 OR
- □ Human Immunodeficiency Virus (HIV)-infected persons aged ≥11 years should routinely receive MenACWY vaccine** (Category A)
 - Majority of Work Group members support vaccinating HIV-infected persons aged ≥2 months
 - Cost-effectiveness analysis and GRADE based on vaccinating HIVinfected persons aged ≥2 months

^{*}Includes MenACWY-D (Menactra®), MenACWY-CRM (Menveo®), and Hib-MenCY-TT (MenHibrix®) **Includes MenACWY-D (Menactra®) and MenACWY-CRM (Menveo®)

Agenda

1.	Update: Trumenba® Label	Laura York, Pfizer Vaccines
2.	Summary of WG Discussion: Trumenba® Label	Jessica MacNeil, CDC
3.	Cost-effectiveness of MenACWY in HIV- Infected Persons	Ismael Ortega-Sanchez, CDC
4.	GRADE for MenACWY in HIV-Infected Persons	Monica Patton, CDC
5.	Considerations for Use of MenACWY in HIV-Infected Persons	Jessica MacNeil, CDC
	Proposed Recommendations/Vote	Jessica MacNeil, CDC
	VFC Vote	Jeanne Santoli, CDC

Proposed Timeline

October 2016

- Vote on MenB-FHbp 2-dose and 3-dose schedules
- Informational session:
 - Revised meningococcal disease outbreak guidelines
 - Independent evaluation of hSBA data for MenB-FHbp and MenB-4C against several U.S. outbreak strains
 - Impact of MenB-FHbp on carriage among U.S. college students

February or June 2017

Begin discussion of MenB boosters for persons at increased risk