

Meningococcal Vaccines Session

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Advisory Committee on Immunization Practices

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Two serogroup B meningococcal (MenB) vaccines licensed for persons aged 10—25 years in 2014 and 2015

- MenB-FHbp (Trumenba[®], Pfizer):
 - Persons at increased risk for serogroup B meningococcal disease: 3-dose series administered at 0, 1-2, 6 months
 - Healthy adolescents: 2-dose series administered at 0 and 6 months
- MenB-4C (Bexsero[®], GlaxoSmithKline):
 - 2-dose series administered at 0 and ≥ 1 month

ACIP MenB recommendations for persons at increased risk for serogroup B meningococcal disease

- In February 2015, ACIP recommended that persons aged ≥ 10 years at increased risk for serogroup B meningococcal disease receive a MenB primary series:
 - Persons with complement component deficiency (including complement inhibitor use)
 - Persons with functional or anatomic asplenia
 - Microbiologists routinely exposed to isolates of *Neisseria meningitidis*
 - Persons exposed during an outbreak
- These groups are also recommended to receive a quadrivalent meningococcal conjugate (MenACWY) primary dose or series.
 - Booster dose every 5 years thereafter for as long as increased risk remains.

ACIP MenB recommendations for adolescents

- In June 2015, ACIP recommended that adolescents aged 16-23 years may be vaccinated with a MenB primary series based on individual clinical decision-making (preferred age of 16-18 years).

MenB booster doses

- ACIP does not currently recommend MenB booster doses for persons at increased risk for serogroup B meningococcal disease.
 - Recommendation would be off-label; booster vaccination currently not licensed.
- Data and considerations for MenB booster doses were presented at the February, 2017 ACIP meeting.
 - ACIP requested further data to inform policy options.
- Additional data on immune persistence following a MenB primary series and immunogenicity, safety, and persistence of a MenB booster dose have been generated.
 - Manufacturers have indicated that no further data are forthcoming.

Meningococcal Vaccines Work Group Activities

- Reviewed data on persistence of the immune response following a MenB primary series and immunogenicity, persistence, and safety of a MenB booster dose.
- Formulated policy questions and evaluated quality of evidence for MenB booster doses.
- Summarized Work Group perspectives and developed potential MenB booster policy options for ACIP feedback.

Agenda

- Summary of data on the immune persistence following a MenB-FHbp primary series and immunogenicity and safety of a MenB-FHbp booster dose: Dr. Paul Balmer (Pfizer)
- Summary of data on the immune persistence following a MenB-4C primary series and immunogenicity and safety of a MenB-4C booster dose: Dr. Phil Watson (GSK)
- GRADE and Evidence to Recommendations Framework for MenB booster doses: Dr. Catherine Bozio (CDC/NCIRD)
- Work Group interpretation of data, considerations, and next steps: Dr. Sarah Mbaeyi (CDC/NCIRD)

Work Group Members

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- Kelly Moore
- Hank Bernstein
- Veronica McNally

Ex Officio Members

- Lucia Lee (FDA)
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