

Updates to Meningococcal ACIP Statement

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February 23, 2012



Extending 2-10 year-old language to include 9-23 month-olds

- ❑ Initial plan to formulate recommendations for infants and toddlers together (2 through 23 months)**
 - No licensed infant product
- ❑ Need to update 2005 ACIP Meningococcal Statement**
 - New recommendations, including high-risk for 9 through 23 month-olds
 - No routine recommendation for 2 through 10 year-olds
- ❑ Immunogenicity and safety of MenACWY-D in 9-23 month-olds presented in June, 2011**
 - Desire to include information on all licensed products and indications in updated statement

Two-dose primary series of MenACWY-D similar to a single dose at 2 years old

- **High proportion of subjects achieved hSBA titers $\geq 1:8$ after second dose**
 - 100% for serogroup C, 94% for serogroup Y
- **Most subjects no longer with hSBA titers $\geq 1:8$ 3 years after primary series**
 - <20% for serogroups C and Y

Current Incidence of serogroup C and Y disease among 1 year-olds similar to incidence among 2-4 year-olds

Age	Serogroup C and Y Incidence (per 100,000 population) 2007-2009
1 year	0.17
2-4 years	0.13

Average annual cases and incidence of serogroup C and Y meningococcal disease
*1993-2009 ABCs data estimated to U.S. population with 18% correction for under reporting

Background Information in Statement

- ❑ MenACWY-D is licensed for use as a two dose primary series in toddlers 9 through 23 months and as a single dose in children 2 through 10 years.**
- ❑ MenACWY-CRM is licensed for use starting at age 2 years as a single dose.**
- ❑ These vaccines are safe, immunogenic, will provide protection against meningococcal disease caused by serogroups A, C, Y, and W-135.**
- ❑ Antibodies wane quickly in this age group and most vaccinated children will not be protected three years after vaccination.**

Updated Language in ACIP Statement

- ❑ Routine vaccination against meningococcal disease is not recommended for children ages 9 months through 10 years.
- ❑ If a child receives MenACWY prior to their 10th birthday, they should also receive the routinely recommended doses at ages 11 through 12 years and age 16 years.

Next Steps

- ❑ **Publish updated ACIP Meningococcal Vaccines Statement (MMWR R&R)**

- ❑ **Continue GRADE for infant vaccines under consideration for licensure**
 - **GRADE evidence for each vaccine separately**
 - **Formulate recommendations for infant vaccination**
 - **Working Group consensus for no routine recommendation presented in October 2011**
 - **Consider harmonizing 9 months through 10 year-old language with infant recommendation language**

Discussion