

Disease Control Branch Tel. (951) 358-5107 Fax. (951) 358-5102

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PUBLIC HEALTH ALERT OUTBREAK OF MENINGOCOCCAL DISEASE AMONG ADULT MALES IN SOUTHERN CALIFORNIA: UPDATED RECOMMENDATIONS FOR MENINGOCOCCAL VACCINATIONS JUNE 30, 2016

Situation Update

The California Department of Public Health is reporting an increase of invasive meningococcal disease among men living in Southern California, most of whom were men who have sex with men (MSM). Outbreaks of serogroup C meningococcal disease among MSM have been reported in communities including New York City, Los Angeles County and Chicago since 2014. Since May 2016, nine confirmed cases of meningococcal disease have been reported in adult males in Southern California. No direct social connection has been found between the cases, but the majority are MSM. No cases in MSM have been reported in Riverside County thus far in 2016. Isolates for six of the nine have had meningococcal serogrouping performed so far, with all six found to be serogroup C.

Background Information

Invasive meningococcal disease includes meningitis, bacteremia and sepsis and is caused by *Neisseria meningitidis* bacteria, which are transmitted from person-to-person through respiratory droplets usually during close contact. Persons who are HIV-infected are at increased risk of meningococcal disease. In addition, MSM without HIV infection may also be at **increased risk**, including those who:

- Regularly have close or intimate contact with multiple partners, or who seek partners through the use of online websites or phone digital applications;
- Regularly visit crowded venues such as bars, parties, etc.;
- Smoke cigarettes, marijuana or illegal drugs, or spend time in smoky settings.

Quadrivalent meningococcal conjugate vaccines (MCV4) protect against serogroup C disease, the serogroup causing clusters and outbreaks among MSM, as well as A, W and Y disease. Although serogroup B vaccines are also available, serogroup B has not been associated with similar clusters in this population.

Because of the increased risk for invasive meningococcal disease in persons with HIV infection, 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.

Updated meningococcal vaccination recommendations:

- All HIV-infected persons (≥2 months of age) should receive two doses of MCV4 vaccine (Menveo® or Menactra®), 8-12 weeks apart, as their primary series. Previously vaccinated HIV-infected persons who received only one dose of vaccine should receive a second dose at the earliest opportunity, regardless of the time interval since previous dose. A booster dose should be given every 5 years if the previous dose was administered at >7 years of age.
- MSM who are not HIV-infected but may be at increased risk of meningococcal disease should be offered one 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 was >5 years ago. MSM who are not known to be HIV-infected and have not been tested in the past year should be offered HIV testing.
- All adolescents should continue to be routinely vaccinated with MCV4 vaccine as per current ACIP recommendations.*
- Infants, children and adults with increased risk of meningococcal disease (due to underlying complement deficiency or asplenia, or due to exposure through travel, occupation, or outbreak) should continue to be routinely vaccinated with meningococcal vaccines as per current ACIP recommendations.*

Disease Reporting

All suspect, probable and confirmed meningococcal disease cases should be reported immediately to Disease Control at 951-358-5107 during regular business hours or to the Public Health Duty Officer after hours at (951) 782-2974. For more information, see http://www.rivco-diseasecontrol.org/.

^{*} http://www.cdc.gov/vaccines/vpd-vac/mening/who-vaccinate-hcp.htm and http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/mening.html