### Meningococcal B Vaccine

**Vaccine Description**
- Brands: Bexsero® (MenB-4C), Trumenba® (MenB-FHbp)
- Inactivated (recombinant) vaccine
  - MenB-4C contains 3 recombinant cell surface proteins
  - MenB-FHbp contains 2 FHbp variants
- Bexsero®: Tip cap contains natural rubber latex
- See package insert

**Dose & Route**
- Dose: 0.5 mL
- Route: IM in deltoid region of upper arm. (Precaution: hemophilia, thrombocytopenia, and anticoagulation therapy)
- See package insert

**Indications**
- MenB vaccine routinely recommended for people 10 years of age and older at increased risk due to:
  - a serogroup B meningococcal disease outbreak,
  - being routinely exposed to Neisseria meningitidis occupationally, or
  - certain medical conditions such as:
    - a non-functioning, absent, or removed spleen (asplenia)
    - a complement (immune) component deficiency (e.g., C5-C9, properdin, factor H, factor D)
  - Receiving a complement inhibitor (i.e., Solaris)
- Although safety and efficacy of MenB vaccine is not established in adults’ ≥26 years of age, ACIP recommends routine vaccination in adults’ ≥26 years of age with the above risk factors.
- MenB vaccines may be prescribed *based on shared decision making* for healthy first-year college students living in residence halls, military recruits, or other adolescents (preferably at 16 through 18 years of age). MenB vaccine is not recommended for persons who travel to or reside in countries where meningococcal disease is hyperendemic or epidemic (because the risk for meningococcal disease in these countries generally is not caused by serogroup B).
- Before administering MenB vaccines, providers should consult the package insert for precautions, warnings, and contraindications.

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### Administration Schedule
- Bexsero: 2-dose series, separated by at least 1 month
- Trumenba (MenB-FHbp) is licensed as both a 2-dose (at 0 and 6 months) and 3-dose (at 0, 1-2, and 6 months) series. The choice of dosing schedule may depend on the risk of exposure and the patient’s susceptibility to meningococcal serogroup B disease. If the second dose is administered earlier than 6 months after the first dose, a third dose should be administered at least 4 months after the second dose.
- The same vaccine must be used for all doses.
- May be given with other age-appropriate vaccines

### Booster
- Booster doses for previously vaccinated persons is not routinely recommended unless person becomes or remains at increased risk. A booster dose 1 year after primary series and every 2-3 years can be considered.
- An order by a privileged provider is required.

### Contraindications
- Severe allergic reaction to a previous dose of Bexsero or Trumenba or any component of the vaccines.

### Special Considerations
- Defer administration of MenB vaccine during pregnancy or lactation, unless the woman is at increased risk for disease and benefits of vaccination outweigh potential risks.
- Immediately prior to administration of either vaccine, shake single-dose prefilled syringe well to obtain a homogeneous suspension.
- Either MenB vaccine may be administered to immunosuppressed individuals; however, immune response may be reduced.
  - For persons at increased risk for meningococcal disease and for use during serogroup B meningococcal disease outbreaks, ACIP recommends three doses of Trumenba® at 0, 1-2, and 6 months.
  - For healthy adolescents not at increased risk for meningococcal disease, ACIP recommends 2 doses of Trumenba® at 0 and 6 months.
- See Storage and Handling Section
  - Bexsero: 2–8°C; protect from light. Do not freeze; if freezing occurs, discard vaccine.
  - Trumenba: 2–8°C. Store syringes horizontally (lying flat) to minimize redispersion time. Do not freeze; if freezing occurs, discard vaccine

VIS: [https://www.cdc.gov/vaccines/hcp/vis/vis-statements/mening-serogroup.html](https://www.cdc.gov/vaccines/hcp/vis/vis-statements/mening-serogroup.html)
Pregnancy registry for Bexsero at 877-413-4759; also notify DHA- IHD
Additional education may be found at [www.health.mil/meningococcal](http://www.health.mil/meningococcal)