

Quadrivalent meningococcal ACYW-135 vaccine (Menactra[®]): information for students, parents & high risk individuals

This fact sheet provides basic information for the public. It is not intended to provide or take the place of medical advice, diagnosis or treatment. Always talk to a health care professional about any health concerns you may have, before you make any changes to your current diet, lifestyle or treatment.

Updates:

Effective December 2014, Ontario has expanded its publicly funded high risk meningococcal immunization program to include additional high risk conditions, an extended age range for eligibility, and additional primary and booster doses.

What is invasive meningococcal disease (IMD)?

IMD is caused by bacteria known as *Neisseria meningitidis* (commonly known as meningococcus). Many people (10% of the population) carry the bacteria at the back of their throat or nose without feeling sick. In rare instances, the bacteria overcome the body's natural defenses and cause serious diseases, including meningitis (infection of the lining of the brain and spinal cord) and septicemia (widespread infection involving the blood and multiple organs). IMD causes death in 8-15% of cases and 11 to 19% of survivors will suffer some form of permanent disability, such as hearing loss, neurological damage or limb loss.

The symptoms of IMD can vary widely, and can include sudden onset of high fever, severe headache, vomiting, stiff neck and a rash. Sensitivity to light, sleepiness, confusion and, in severe cases, coma may also occur. The consequences of meningococcal meningitis can be severe.

How do you get IMD?

Meningococcus bacteria are spread by direct contact with respiratory and oral secretions (saliva, and/or nasal mucus) or, in other words, contact with saliva (or spit) with an infected person or carriers who have no symptoms. To prevent the spread of meningococcal disease, objects that have come in contact with another person's mouth should not be shared. Furthermore, good hand hygiene and the use of sleeves, the shoulder, or tissues to cover coughs or sneezes are important to consistently practice.

Who is eligible to receive the publicly funded vaccine?

There are a number of vaccines available in Canada which protect against various serogroups (strains) that cause meningococcal disease. The primary focus of this fact sheet is on the meningococcal conjugate vaccine that protects against serogroups A, C, Y, and W-135 (Men-C-ACYW-135).

The Men-C-ACYW-135 vaccine is publicly funded routinely at school-based immunization clinics for grade 7 students in Ontario, for high risk individuals, as well as for case and contact management.

Routine childhood and school-based meningococcal immunization programs

Since 2004, routine immunization against serogroup C meningococcal disease has been publicly funded for children at one year of age. In 2005, the program was further expanded to publicly fund the vaccine for all grade 7 students as well as a catch-up program offered to 15-19 year olds.

In 2009, the Ministry of Health and Long-Term Care (the ministry) replaced the meningococcal conjugate C vaccine for grade 7 students with a quadrivalent meningococcal conjugate vaccine (Men-C-ACYW-135), Menactra[®]. This vaccine not only provides protection against serogroup C, but also against 3 additional strains that cause meningococcal disease (serogroups A, Y and W-135). The vaccine is licensed for use in Canada between the ages of 9 months and 55 years of age.

Starting in the 2014/15 school year, grade 7 students need to have proof of immunization with Men-C-ACYW-135 vaccine, or a valid exemption, to attend school in Ontario.

For grade 7 students who have not been previously immunized with Men-C-ACYW-135 vaccine, one dose is required as part of the routine meningococcal immunization program. For students who have previously been immunized with Men-C-ACYW-135 vaccine, please contact your health care provider or local public health unit.

High risk meningococcal immunization program

Since 2009, the ministry has offered a one-dose publicly funded high risk meningococcal immunization program for individuals with certain medical conditions. Effective December 2014, the high risk program will be expanded to include additional high risk conditions, an extended age range for eligibility, and additional primary and booster doses.

Under the high risk meningococcal immunization program, the Men-C-ACYW-135 vaccine is publicly funded for individuals **9 months to 55 years of age** with the following high risk conditions:

- a. Individuals with functional or anatomic asplenia
- b. Individuals with complement, properdin, factor D Deficiency or primary antibody deficiencies
- c. Cochlear implant recipients (pre/post implants)
- d. Individuals with acquired complement deficiency (e.g. persons receiving eculizumab) **(NEW)**
- e. Individuals with HIV **(NEW)**

Two to four doses of Men-C-ACYW-135 vaccine are required for high risk individuals, depending on the age at first dose. This should be followed by booster doses every 3 to 5 years for high risk

individuals 9 months to 6 years of age, and every 5 years for high risk individuals between 7 and 55 years of age.

In addition, for high risk individuals over the age of 55 years, Ontario publicly funds a single dose of meningococcal polysaccharide ACYW-135 (Men-P-ACYW-135) vaccine as the final booster dose five years after the last booster dose of Men-C-ACYW.

For more information about the high risk meningococcal immunization program, please contact your health care provider or local public health unit.

Who should not get the vaccine?

Individuals with a history of anaphylaxis after a previous dose of a meningococcal conjugate vaccine and individuals with proven immediate or anaphylactic hypersensitivity to any component of the vaccine or its container should not receive the vaccine.

Who should consult their health care provider when considering the vaccine?

Individuals who:

- have any further question about the vaccine
- high fever or serious illness
- have allergies to any component of the vaccine
- pregnant or nursing
- have a weakened immune system
- have bleeding disorder or taking blood-thinning medications
- have previously had a neurological condition called Guillian-Barré Syndrome.

Is the Men-C-ACYW-135 vaccine safe and effective?

Yes, the Men-C-ACYW-135 vaccine is very safe and effective. Vaccine safety is a priority for the ministry. All publicly funded vaccines are tested to make sure they are both safe and effective. Vaccine safety is continually monitored by public health.

Most individuals will have no side effects from the Men-C-ACYW-135 vaccine; however, of those that do occur, they tend to be mild and may include soreness, redness, itching and/or rash where the needle was given. Other side effects such as headache, dizziness and nausea may occur. Severe reactions are rare.

Please report any side effects or severe vaccine reactions to your health care provider or [local public health unit](#). You should always discuss the benefits and risks of any vaccine with your health care provider.

When should I call my health care provider?

Call your health care provider or go to the nearest emergency department if any of the following symptoms develop within three days of receiving the vaccine:

- hives;
- swelling of the face or mouth;
- trouble breathing;
- very pale colour and serious drowsiness;
- high fever (over 40°C);
- convulsions or seizures; or
- other serious symptoms (e.g., paraesthesia).

Who should I talk to if I have any more questions about Men-C-ACYW-135 vaccine?

Talk to your health care provider or call your local public health unit for more information.

Your record of protection

After receiving a vaccine, make sure your personal immunization record (i.e., the "Yellow Card") is updated. Keep it in a safe place!

For More Information

Further information is available at:

- Your public health unit: www.phdapps.health.gov.on.ca/PHULocator.
- Immunization information is available at: www.ontario.ca/vaccines.