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**Outbreak of Serogroup B Meningococcal Disease Associated with Rutgers University – New Brunswick, February 2019: Risk Groups and Vaccination Recommendations (as of July 29, 2019)**

In February 2019, two undergraduate students at Rutgers University – New Brunswick were diagnosed with serogroup B meningococcal disease. The Centers for Disease Control and Prevention (CDC) performed special tests on the specimens from the two cases; the tests showed that the typing genes tested were identical between the two organisms. While we cannot predict whether there will be additional cases of meningococcal disease on campus, having two cases occurring over a short time with genetically related organisms suggests that there is an outbreak associated with Rutgers University – New Brunswick.

**Risk-groups**

Since immunization is the most effective way to protect against meningococcal disease, the New Jersey Department of Health (NJDOH) and Rutgers University, with support from the CDC, continue to **strongly recommend** serogroup B meningococcal vaccine (MenB) for the following at-risk populations at Rutgers University – New Brunswick:

- All current and incoming undergraduate students including transfer students, regardless of whether they live in campus housing
- Graduate students who live in undergraduate dormitories
- All members of the Rutgers University – New Brunswick community with medical conditions that put them at increased risk for meningococcal disease. These conditions include all functional and anatomic asplenia (including sickle cell disease), persistent complement component deficiencies, and taking Soliris® (eculizumab). Microbiologists who are routinely exposed to meningococcal bacteria should also be vaccinated.

**Vaccines**

People in the at-risk populations above who have not previously received a MenB vaccine should receive the first dose as soon as possible. Two vaccines provide protection against serogroup B meningococcal disease: Bexsero® (GlaxoSmithKline) and Trumenba® (Pfizer). In the setting of an outbreak, either two doses of Bexsero® or three doses of Trumenba® are recommended.

People in the at-risk populations who have started but not yet completed a series of MenB vaccine should complete the series as soon as possible.

Immunity following receipt of MenB is short-lived. Evidence presented to the Advisory Committee on Immunization Practices (ACIP) suggests that vaccine recipients who completed a previous MenB vaccine series  $\geq 1$  year prior may no longer be protected against serogroup B meningococcal disease. For these individuals, a MenB booster dose may be needed to optimize protection during the outbreak. In June 2019, the ACIP officially voted to include booster dose recommendations. If the CDC director approves the recommendation, it will be published as official recommendations in the *Morbidity and Mortality Weekly Report*. A summary of the ACIP recommendations is available through the American Academy of Pediatrics website at: <https://www.aappublications.org/news/2019/06/28/acip062819>

**People should get the same vaccine brand for all doses, including the booster dose — Bexsero® and Trumenba® are not interchangeable.**