WILLIAM B. WALKER, M.D. HEALTH SERVICES DIRECTOR

DAN PEDDYCORD, RN, MPA/HA
DIRECTOR OF PUBLIC HEALTH



CONTRA COSTA
PUBLIC HEALTH
COMMUNICABLE DISEASE
PROGRAMS
597 CENTER AVENUE, SUITE 200-A
MARTINEZ, CALIFORNIA 94553
PH (925) 313-6740
FAX (925) 313-6465

HEALTH ADVISORY

Meningococcal Disease Outbreak in Southern California

AUGUST 18, 2016

SUMMARY:

Since March 2016, 24 confirmed cases of serogroup C meningococcal disease, including two fatal cases, have been reported among residents of Los Angeles and Orange Counties and the City of Long Beach. Of the 24 cases, 22 are men and of these, 19 identified as men who have sex with men (MSM). Persons with HIV infection are known to be at increased risk of meningococcal disease, and two cases had HIV infection. This is the largest meningococcal disease outbreak among MSM that has occurred in the United States to date. The California Department of Public Health (CDPH) issued a clinician health advisory on August 16, 2016

(https://www.cdph.ca.gov/HealthInfo/discond/Documents/CDPH-MSM-mening-health-advisory-Aug16-2016.pdf).

Quadrivalent meningococcal conjugate vaccines (MenACWY) protect against serogroup C disease, the serogroup causing clusters and outbreaks among MSM, as well as against A, W, and Y disease. Although serogroup B (MenB) vaccines are now available, serogroup B has not been associated with clusters or outbreaks among MSM.

Actions Requested of Healthcare Professionals:

- 1. **Report** all suspect and confirmed cases of Meningococcal disease **immediately** to Contra Costa Communicable Disease Programs, 925-313-6740
- 2. Recommend MenACWY vaccination for:
 - All HIV-infected persons
 - MSM who plan to travel to Los Angeles or Orange Counties or the City of Long Beach (to be effective, vaccination should occur ≥2 weeks prior to travel)
- 3. **Refer** the patients described above to where meningococcal vaccine can be obtained, if unavailable at your practice. Healthcare providers may go to the meningococcal outbreak's informational page at http://bit.do/menoutbreak The webpage includes links to local health department vaccine clinic locations and the "Adult Vaccine Finder," an online widget to help patients locate vaccine based on their ZIP code.

CLINICAL

- Neisseria meningitidis, a gram-negative diplococcus bacterium carried by 5-10% of the population.
- Invasive disease manifests most commonly as meningitis and/or meningococcemia and may progress to purpura fulminans, shock, and death within hours of onset. Other manifestations, such as septic arthritis or orbital cellulitis, may be observed. The case fatality rate is 10% and 11-19% of surviving patients have sequelae (e.g., neurologic disability, limb loss, and hearing loss).



CURRENT RECOMMENDATIONS:

Case reporting

- **Confirmed:** Detection of *N. meningitidis*-specific nucleic acid in a specimen obtained from a normally sterile body site (e.g., blood or CSF), using a validated polymerase chain reaction (PCR) assay, or, isolation of *Neisseria meningitidis* from a normally sterile body site (e.g., blood or cerebrospinal fluid, or, less commonly, synovial, pleural, or pericardial fluid), or from purpuric lesions.
- **Probable:** Detection of *N. meningitidis* antigen in formalin-fixed tissue by immunohistochemistry
- **Suspect:** Clinical purpura fulminans in the absence of a positive blood culture, or, Gram-negative diplococci, not yet identified, isolated from a normally sterile body site (e.g., blood or CSF)

Meningococcal vaccine recommendations

- MSM who are not known to be HIV-positive, and
 - Plan to travel to Los Angeles or Orange Counties or the City of Long Beach may be offered MenACWY prior to travel (to be effective, vaccination should occur ≥2 weeks prior to travel).
 - Have not been tested for HIV infection within the last year should be offered an HIV test along with MenACWY vaccination.
 - Although Menactra® and Menveo® are licensed for persons through 55 years of age, they may be administered to persons 56 years of age and older. Meningococcal polysaccharide vaccine (MPSV4, Menomune®) is licensed for persons ≥56 of age but is not currently available.
- HIV-infected persons residing anywhere in the United States should routinely receive 2 doses of MenACWY vaccine (Menveo or Menactra), 8-12 weeks apart, as their primary series.
 - Previously vaccinated HIV-infected persons who received only 1 dose of vaccine should receive a second dose at the earliest opportunity, at least 8 weeks after the previous dose. A booster dose should be given every 5 years if the previous dose was administered at ≥7 years of age.
 - Because of their increased risk for meningococcal disease, 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 MenACWY vaccine.
 MenACWY is included on the AIDS Drug Assistance Program (ADAP) formulary.

ADDITIONAL QUESTIONS:

The Contra Costa Public Health, Communicable Disease Programs can be reached 8AM-5PM M-F at: 925-313-6740 (phone) or 925-313-6465 (fax).

MORE RESOURCES

More information can be found on www.cdph.ca.gov, www.cchealth.org or www.cdc.gov.

