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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 March 12, 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, **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 ≥ 1 year prior may no longer be protected against serogroup B meningococcal disease. For these individuals, a MenB booster dose may be needed for protection during the outbreak. While there is no official ACIP recommendation on MenB booster doses at this time, public health officials are recommending the dose to optimize protection during this outbreak.

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