

MCV4 YOU'RE NOT DONE IF YOU GIVE JUST ONE

GIVE 2 DOSES to Strengthen Protection

It's serious: Meningococcal disease, though rare, can cripple or kill, often without warning.

- **Unpredictable** – most cases occur at random, not in outbreaks; transmitted in crowded settings
- **Sudden onset** – difficult to diagnose; mimics symptoms of common illnesses
- **Rapidly progresses** – can lead to shock, coma, and death within 24 hours
- Even with proper treatment of those who are infected, **10%–15% die**
- 11%–19% of survivors suffer **lifelong disability** (hearing loss, amputation of arms or legs, or brain damage)

It affects all ages, but especially adolescents and young adults.

- **16–21 years of age:** At highest risk among people older than 1 year of age

It's preventable: Safe and effective meningococcal vaccines are available and recommended.

- **Not 1 shot but 2:** First dose of MCV4^a at 11–12 years of age (*recommended since 2005*) **AND**
- **A second dose at 16 years of age** (*recommended since 2010*)

Opportunities to give MCV4 are frequently missed when adolescents are already in the office.

Missed Opportunities for Administering MCV4 #1 in Age-Eligible Patients (November 2006–June 2011)¹

Reason for Visit	Eligible patients (%) who did NOT receive MCV4 during visit
Preventive care (n = 1678)	57% (n = 954)
Vaccine-only (n = 527)	86% (n = 453)
Non-preventive care (n = 2944)	96% (n = 2821)

- Unfortunately, 86% of patients who were in the office for a “vaccine-only” visit did not receive the first dose of MCV4 along with other recommended vaccines.
- Timely vaccination remains a challenge in meningococcal disease prevention. **More than 70% of those eligible for the second dose at 16 years of age had not received it by 17 years of age.**²

WHAT CAN YOU DO?

- ▶ Recognize the increased risk of meningococcal disease in your adolescent patients.
- ▶ Make sure your adolescent patients (including those who are not college-bound) are fully vaccinated against meningococcal disease.
- ▶ Give the first dose of MCV4 at 11–12 years of age **and** the second dose at 16 years of age.

^aMCV4 (Meningococcal conjugate vaccine 4-valent or Meningococcal ACWY vaccine) helps protect against meningococcal disease resulting from infection with serogroups A, C, W, or Y.

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RECOMMEND!

- ▶ Make meningococcal disease prevention part of your anticipatory guidance for adolescent and young adult patients.

Talking points:

- Meningococcal disease is rare but can be deadly for young people your age.
 - You are at increased risk from your mid-to-late teens into your early twenties.
 - Disease comes on suddenly, without warning, and can quickly become life-threatening.
 - Meningococcal vaccine is safe and effective.
 - 2 doses are recommended for adolescents your age.
- ▶ Your strong recommendation for MCV4 **will** make a difference.

VACCINATE!

ACIP Recommendations for MCV4

Give dose #1 at 11–12 years of age AND dose #2 at 16 years of age

Recommendations if dose #1 is delayed:

- If dose #1 is delayed until 13–15 years of age, give dose #2 at 16–18 years of age.^b
- If dose #1 is delayed until 16 years of age or older,^c dose #2 is not recommended.

^b The minimum interval between doses of MCV4 is 8 weeks. Thus, it is possible to give the first dose at 15 and the second dose at 16 years of age, as long as the minimum 8-week interval between doses is observed.

^c Routine MCV4 vaccination of healthy persons who are not at increased risk for exposure to *Neisseria meningitidis* is not recommended after 21 years of age.

REVIEW!

- ▶ Establish office protocols (eg, screening tools) for identifying adolescents who need to be vaccinated.
- ▶ Make use of helpful management tools (reminder-recall systems, standing orders, immunization registries, electronic health record prompts) to track and improve your vaccination coverage.
- ▶ Don't miss opportunities! Train your staff to help identify teens who need vaccination.

Consider every patient encounter an opportunity to vaccinate:

- ✓ Acute care visits
- ✓ Well visits
- ✓ Sports and camp physicals
- ✓ Routine visits for chronic illness
- ✓ Visits for influenza vaccine

www.Give2MCV4.org

Remember: *You're not done if you give just one!*

References:

1. Wong CA, Taylor JA, Wright JA, et al. Missed opportunities for adolescent vaccination, 2006-2011. *J Adolesc Health*. 2013;53(4):492-497.
2. Centers for Disease Control and Prevention. National, regional, state, and selected local area vaccination coverage among adolescents aged 13-17 years—United States, 2013. *MMWR*. 2014;63(29):625-633.