

Meningococcal ACWY Vaccine

Recommendations by Age and Risk Factor

MenACWY Vaccines:
MenACWT-TT (MenQuadfi; Sanofi); MenACWY-CRM
(Menveo; GSK)

Routine Recommendations for Use of Meningococcal A,C,W,Y Vaccine (MenACWY)

This table covers routine vaccination of preteens and teens, as well as catch-up vaccination of teens and young adults.

AGE OF PATIENT	VACCINATION HISTORY	RECOMMENDED MENACWY SCHEDULE
Age 11 through 12 years	None	Give dose #1 of MenACWY.
Age 13 through 15 years	None	Give catch-up dose #1 of MenACWY.
Age 16 years	1 prior dose	Give dose #2 of MenACWY.
Age 16 through 18 years	None	Give 1 dose of MenACWY.
	1 prior dose when younger than 16 yrs	Give dose #2 of MenACWY.
Age 19 through 21 years	None, or 1 prior dose when younger than 16 yrs	Consider giving 1 dose of MenACWY.
First year college students living in residence halls	None, or 1 prior dose when younger than 16 yrs, or 1 prior dose since 16th birthday, but more than 5 yrs previously	Give 1 dose of MenACWY.

Risk-based Recommendations for Persons with Underlying Medical Conditions or Other Risk Factors

TARGETED GROUP BY AGE/OR RISK FACTOR	PRIMARY DOSE(S) ¹	BOOSTER DOSE(S) ¹
Travelers to or residents of countries where meningococcal disease is hyperendemic or epidemic, people present during outbreaks caused by a vaccine serogroup, ² and other people with prolonged increased risk for exposure (e.g., microbiologists routinely working with <i>Neisseria meningitidis</i>).		
For age 2 through 6 months	Give 3 doses of Menveo, 8 weeks apart, and a 4th dose at age 12–18 months. If possible, vaccination should begin at age 2 months.	If primary vaccination is completed before the 7th birthday: give one booster dose 3 years after primary series, then every 5 years thereafter, as long as risk remains. If primary vaccination is completed at age 7 years or older: give a booster dose every 5 years thereafter, as long as risk remains.
For age 7 through 23 months who have not initiated a series of MenACWY	Give 2-dose series of Menveo. ³ Separate the 2 doses by at least 12 weeks. ⁴	
For age 2 years and older	Give 1 dose of any MenACWY vaccine.	
People with persistent complement component deficiencies ⁵		
For age 2 through 6 months	Give 3 doses of Menveo, 8 weeks apart, and a 4th dose at age 12–18 months. If possible, vaccination should begin at age 2 months.	If primary vaccination is completed before the 7th birthday: give one booster dose 3 years after primary series, then every 5 years thereafter, as long as risk remains. If primary vaccination is completed at age 7 years or older: give a booster dose every 5 years thereafter, as long as risk remains.
For age 7 through 23 months who have not initiated a series of MenACWY	Give 2-dose series of Menveo. Separate the 2 doses by at least 12 weeks. ⁴	
For ages 2 years and older	Give 2 doses of MenACWY (any vaccine), 8 weeks apart. ⁶	
People with HIV infection or functional or anatomic asplenia (including sickle cell disease)		
For age 2 through 6 months	Give 3 doses of Menveo, 8 weeks apart, and a 4th dose at age 12–18 months. If possible vaccination should begin at age 2 months.	If primary vaccination is completed before the 7th birthday: give one booster dose 3 years after primary series, then every 5 years thereafter. If primary vaccination is completed at age 7 years or older: give a booster dose every 5 years thereafter.
For age 7 through 23 months who have not initiated a series of MenACWY-CRM	Give 2 doses of Menveo. ³ Separate the 2 doses by at least 12 weeks.	
For ages 2 years and older	Give 2 doses of MenACWY (any vaccine), 8 weeks apart. ⁶	

Note: A separate vaccine is needed for protection against meningococcal serogroup B disease; a combination MenABCWY vaccine (Penbraya, Pfizer) is also available if age 10 years or older and needing protection against serogroups A, B, C, W, and Y.

FOOTNOTES

- If available, use the same vaccine product for all doses in the series given to infants, including the booster doses.
- Seek advice of local public health authorities to determine if vaccination is recommended.
- If initiating vaccination with Menveo in a child age 7 through 23 months, dose 2 should be given no younger than age 12 months.
- If child age 7 through 23 months will enter an endemic area in less than 3 months, give doses as close as 2 months apart.
- Persistent deficiency of complement components C3, C5–C9, properdin, factor D, or factor H caused by an immune system disorder or by taking a complement inhibitor (Soliris [eculizumab] or Ultomiris [ravulizumab]).
- If the person has a history of 1 dose of MenACWY at the time of diagnosis with a high-risk condition for which a 2-dose primary series is recommended, give dose 2, then boost every 5 years as long as risk remains.

