Meningococcal disease – immunisation

Summary

- There are 13 strains of meningococcal disease. You can be immunised against strains A, B, C, W and Y.
- In Australia, a free meningococcal ACWY vaccine is provided for children at 12 months of age and in Year 10 of secondary school (or aged 15 to 19 years).
- A free catch-up dose of meningococcal ACWY vaccine is also provided for unimmunised people under 20 years of age.
- People at increased risk of meningococcal disease should be vaccinated. This includes infants, children, adolescents, young adults and others.
- Give paracetamol with every dose of meningococcal B vaccine given to children under four years of age.

Meningococcal disease is any infection caused by meningococcal bacteria (*Neisseria meningitidis*). It is uncommon but very serious.

About 10 per cent of the population carry meningococcal bacteria in their throat without becoming unwell. These people are known as ‘carriers’, and they can pass the disease on to someone else.

Meningococcal bacteria are passed from person to person by close, prolonged contact. In a small number of people, the bacteria can enter the bloodstream and cause invasive meningococcal disease. This can develop very quickly, and causes death in about five to 10 per cent of cases.

Immunisation against meningococcal bacteria is the best protection against meningococcal disease.

Even if you have had meningococcal disease, you are still advised to be immunised against this life-threatening disease. Having the disease does not mean you will develop lifelong immunity.

Meningococcal ACWY vaccination

There are 13 strains or serogroups of meningococcal bacteria. Meningococcal vaccines are available to protect against disease strains A, B, C, W and Y.

ACWY vaccination is free for some people

In Victoria, immunisation against meningococcal serogroups A,C,W and Y (as the ACWY vaccine) is available for free as part of the National Immunisation Program schedule for:

- children aged 12 months
- children from 13 months to under 20 years of age, who did not have their meningococcal C vaccine at 12 months (before July 2018, the meningococcal vaccine provided at 12 months of age was only for strain C)
- young people in Year 10 of secondary school
- young people not in secondary school, aged 15 to 19 years.

Young people in the 15 to 19 years age group are more likely to spread the disease to others. One in five people in this age group carry the bacteria that cause meningococcal disease. Immunisation experts have advised that immunising this age group can prevent spread to other age groups and protect the wider community.

Eligible young people who are away from school on the day the vaccine was given, or who do not attend secondary school, can attend either a local government community immunisation session, or a General Practitioner (GP) to receive the free meningococcal ACWY vaccine. The GP may charge a consultation fee.

Contact your local government to find out when and where immunisation sessions are held.

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ACWY vaccination can be purchased on prescription

Immunisation against meningococcal serogroups A, C, W and Y is available in a four-in-one combined ACWY vaccine. If you are not eligible for the free vaccine, you can pay for it if you want to protect yourself or your family from these strains of meningococcal disease. This is recommended for high risk groups.

Meningococcal B vaccination

Immunisation against meningococcal serogroup B disease is available on private prescription, but is not available free under the National Immunisation Program schedule. This vaccine is recommended for high risk groups.

High risk groups for meningococcal disease

If you are in one of these high-risk groups, speak to your doctor about which vaccine you should have (and how long protection will last):

- infants and young children, particularly those aged less than two years
- adolescents aged 15 to 19 years
- people who have close household contact with those who have meningococcal disease and who have not been immunised
- people who are travelling to places, such as sub-Saharan Africa, that have epidemics caused by serogroups A, C, W and Y
- pilgrims to the annual Hajj in Saudi Arabia – Saudi Arabian authorities require a valid certificate of vaccination to enter the country
- people who work in a laboratory and who handle meningococcal bacteria
- special risk and immunosuppressed patients, including children aged from six weeks and over, and adults who have high-risk conditions, such as:
  - a poorly functioning spleen or no spleen
  - a complement component disorder
  - HIV
  - current or future treatment with eculizumab or a haematopoietic stem cell transplant.

Pregnancy and meningococcal disease immunisation

Meningococcal vaccines are not usually recommended for women who are pregnant, but they might be given if your doctor thinks your situation puts you at risk of the disease.

Meningococcal pre-immunisation checklist

Before immunisation, tell the doctor or nurse if the person being immunised:

- is unwell on the day of immunisation (has a temperature over 38.5 °C)
- has ever had a serious reaction to any vaccine
- has had a serious reaction to any component of the vaccine
- has had a severe allergy to anything
- is pregnant.

Meningococcal ACWY vaccine side effects

The meningococcal ACWY vaccine is effective and safe, although all medications can have unwanted side effects.

Side effects from this vaccine are uncommon and are usually mild, but may include:

- localised pain, redness and swelling at the injection site
- occasionally, an injection-site lump that may last many weeks (treatment is not needed)
- low-grade temperature (fever)
• children being unsettled, irritable, tearful, or generally unhappy, drowsy and tired.

**Managing fever after meningococcal ACWY immunisation**

Common side effects following immunisation are usually mild and temporary (occurring in the first few days after immunisation). Specific treatment is not usually required.

If fever is present, drinking extra fluids and not overdressing can help.

Although routine use of paracetamol after vaccination is not recommended (meningococcal B vaccine is the exception), if fever is present, paracetamol can be given. Check the label for the correct dose according to your child’s weight (15 mg/kg per dose) or speak with your pharmacist, especially when giving paracetamol to children.

**Meningococcal B vaccine side effects**

The meningococcal B vaccine is effective and safe, although all medications can have unwanted side effects.

Meningococcal B vaccine commonly causes fever, localised pain, redness and swelling at the injection site.

**Meningococcal B vaccine for children less than four years of age**

Fever is common in children aged two to 12 months when meningococcal B vaccine is given on the same day with other vaccines commonly given to infants. Fever is less common when meningococcal B and other routine vaccines are given on separate days.

The Royal Children’s Hospital and Monash Immunisation services recommend the use of paracetamol with every dose of meningococcal B vaccine given to children under four years of age. This is to:

• reduce the chance of fever occurring
• reduce the severity of fever that does occur.

Give the first dose of paracetamol (15 mg/kg per dose) 30 minutes before vaccination, or as soon as possible after immunisation, even if children do not have a fever.

Follow this with two more doses of paracetamol given 4 to 6 hours apart, even if children do not have a fever.

**Be sure to give the dose that is written on the bottle according to your child's weight.**

**Managing injection site discomfort**

Many vaccine injections may result in soreness, redness, itching, swelling or burning at the injection site for one to two days. Paracetamol might be required to ease the discomfort. A cold compress on the injection site may relieve discomfort.

**Concerns about immunisation side effects**

If a side effect following immunisation is unexpected, persistent or severe, or if you are worried about yourself or your child’s condition after an immunisation, see your doctor or immunisation nurse as soon as possible or go directly to a hospital.

It is important to seek medical advice if you (or your child) are unwell, as this may be due to other illness rather than because of the vaccination.

In Victoria you can report immunisation side effects to SAEFVIC, the vaccine safety and central reporting service on Tel. 1300 882 924 #1. Ask your immunisation provider how to report adverse events in other states or territories.

**Rare side effects of meningococcal immunisation**

There is a very small risk of a serious allergic reaction (anaphylaxis) to any vaccine. This is why you are advised to stay at the clinic or medical surgery for at least 15 minutes following immunisation in case further treatment is required.

If any other reactions are severe and persistent, or if you are worried, contact your doctor for further information.

**Immunisation and HALO**

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The immunisations you may need are decided by your health, age, lifestyle and occupation. Together, these factors are referred to as HALO.

Talk to your doctor or immunisation provider if you think you or someone in your care has health, age, lifestyle or occupation factors that could mean immunisation is necessary.

**Check your immunisation HALO**

**Where to get help**

- In an emergency, always call triple zero (000)
- Emergency department of your nearest hospital
- Your GP
- Your local government immunisation service
- **Maternal and Child Health Line** (24 hours) Tel. 13 22 29
- **NURSE-ON-CALL** Tel. 1300 60 60 24 -- for expert health information and advice (24 hours, 7 days)
- **Immunisation Section**, Department of Health and Human Services, Victorian Government Tel. 1300 882 008
- **National Immunisation Information Line** Tel. 1800 671 811
- **The National Immunisation Program**, Australian Government
- Pharmacist
- **SAEFVIC**, the Victorian vaccine safety service Tel. 1300 882 924 #1

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**This page has been produced in consultation with and approved by:**

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