

# Yukon Immunization Program Manual

## Section 8 — Biological Products

### Meningococcal Vaccines

June 2026



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<b>Meningococcal B Vaccine</b>		<b>BEXSERO®</b>	
<b>Manufacturer</b>	GlaxoSmithKline Inc.	<b>Biological Classification</b>	Multicomponent, non-live recombinant protein and outer membrane vesicle (OMV) vaccine
<b>Current Formulation</b>	Protection against invasive meningococcal disease caused by Neisseria meningitidis serogroup B		
<b>INDICATIONS</b>	<b>RECOMMENDED AND PROVIDED FREE TO:</b>		
	<p><b>Contacts, IMD outbreak response, or post-exposure prophylaxis</b>            In consultation with CMOH, YCDC, or Yukon Immunization Program Bexsero may be provided to individuals 2 months to 55 years of age who are:</p> <ul style="list-style-type: none"> <li>• close contacts of a confirmed case of serogroup B invasive meningococcal disease</li> <li>• identified during a serogroup B IMD outbreak</li> <li>• identified during emergence of hyperendemic or hypervirulent strains predicted to be susceptible to vaccine</li> </ul>		
	<b>Age at presentation</b>		<b>Schedule</b>
	2 to 5 months of age		<ul style="list-style-type: none"> <li>• <b>Dose 1:</b> 0.5 mL IM</li> <li>• <b>Dose 2:</b> 0.5 mL IM</li> <li>• <b>Dose 3:</b> 0.5 mL IM</li> <li>• <b>Dose 4:</b> 0.5 mL IM after 12 months</li> </ul> <i>Minimum interval: 4 weeks</i>
	6 to 11 months of age		<ul style="list-style-type: none"> <li>• <b>Dose 1:</b> 0.5 mL IM</li> <li>• <b>Dose 2:</b> 0.5 mL IM</li> <li>• <b>Dose 3:</b> 0.5 mL IM after 12 months</li> </ul> <i>Minimum interval: 8 weeks</i>
	12 months to 9 years of age		<ul style="list-style-type: none"> <li>• <b>Dose 1:</b> 0.5 mL IM</li> <li>• <b>Dose 2:</b> 0.5 mL IM</li> </ul> <i>Minimum interval: 8 weeks</i>
10 to 55 years of age		<ul style="list-style-type: none"> <li>• <b>Dose 1:</b> 0.5 mL IM</li> <li>• <b>Dose 2:</b> 0.5 mL IM</li> </ul> <i>Minimum interval: 4 weeks</i>	
<b>Interrupted series:</b> If the series is interrupted, do not restart. Resume where left off.			

<b>Meningococcal B Vaccine</b>		<b>BEXSERO®</b>
	<b>RECOMMENDED BUT NOT PUBLICLY FUNDED:</b>	
	<ul style="list-style-type: none"> <li>• <b>Medically high-risk individuals (2 months of age and older):</b> <ul style="list-style-type: none"> <li>○ Functional or anatomical asplenia, including sickle cell disease</li> <li>○ Congenital complement, properdin, factor D, or primary antibody deficiencies</li> <li>○ Receiving terminal complement inhibitors (e.g., eculizumab [Soliris®])</li> </ul> </li> <li>• <b>Individuals at increased exposure risk</b> <ul style="list-style-type: none"> <li>○ Research, industrial, or clinical laboratory personnel routinely exposed to N. meningitidis</li> <li>○ Military personnel during recruit training or certain deployments</li> <li>○ Travellers to areas with a hyperendemic strain or outbreak caused by vaccine-preventable serogroup B</li> </ul> </li> </ul>	
<b>AVAILABLE FORMAT</b>	<ul style="list-style-type: none"> <li>• Supplied as 0.5 mL single-dose prefilled syringes</li> <li>• Available in packages of 1 or 10</li> </ul>	
<b>CONTRAINDICATIONS</b>	<ul style="list-style-type: none"> <li>• History of anaphylaxis after a previous dose of meningococcal B vaccine or to any component of the vaccine or its container</li> </ul>	
<b>PRECAUTIONS &amp; SPECIAL CONSIDERATIONS</b>	<ul style="list-style-type: none"> <li>• Higher rates of fever occur when administered with routine infant vaccines</li> <li>• Prophylactic acetaminophen is recommended for children up to 3 years when given concurrently with routine vaccines</li> </ul>	
<b>PREGNANCY AND LACTATION</b>	<ul style="list-style-type: none"> <li>• Limited data in pregnancy and lactation but vaccine may be used if indicated</li> </ul>	
<b>INTERCHANGEABILITY</b>	<ul style="list-style-type: none"> <li>• Bexsero® and Trumenba® are not interchangeable</li> <li>• The same product should be used to complete the series</li> </ul>	
<b>RECONSTITUTION AND DILUTION</b>	<ul style="list-style-type: none"> <li>• No reconstitution required</li> </ul>	

<b>Meningococcal B Vaccine</b>		<b>BEXSERO®</b>
<b>ADMINISTRATION</b>	<ul style="list-style-type: none"> <li>• <b>Dose:</b> 0.5 mL</li> <li>• <b>Route:</b> Intramuscular (IM)</li> <li>• <b>Preferred site:</b> <ul style="list-style-type: none"> <li>○ Infants: anterolateral thigh</li> <li>○ Children &gt;1 year and adults: deltoid preferred</li> </ul> </li> <li>• <b>Do not inject in the gluteal area</b></li> </ul>	
<b>CONCURRENT ADMINISTRATION WITH OTHER VACCINES</b>	Bexsero may be administered at the same time, or anytime before or after another inactivated or live vaccine.	
<b>SEROLOGICAL TESTING</b>	Serological testing is not recommended before or after immunization.	
<b>VACCINE COMPONENTS</b>	<p><b>Medicinal ingredients (per 0.5 mL dose):</b></p> <ul style="list-style-type: none"> <li>○ NHBA fusion protein 50 mcg</li> <li>○ NadA protein 50 mcg</li> <li>○ fHbp fusion protein 50 mcg</li> <li>○ Outer membrane vesicles (OMV) 25 mcg (N. meningitidis strain NZ98/254, PorA P1.4)</li> </ul> <p><b>Other ingredients:</b></p> <ul style="list-style-type: none"> <li>○ Aluminum hydroxide (0.5 mg aluminum)</li> <li>○ Histidine</li> <li>○ Sodium chloride</li> <li>○ Sucrose</li> <li>○ Water for injection</li> <li>○ Kanamycin (trace amounts)</li> </ul>	
<b>APPEARANCE</b>	White opalescent liquid suspension.	
<b>BLOOD/ BLOOD PRODUCTS</b>	None	

Meningococcal B Vaccine		BEXSERO®
BOVINE/ PORCINE PRODUCTS	None	
LATEX	The tip cap of the syringe may contain natural rubber latex	
EXPECTED REACTIONS	<ul style="list-style-type: none"> <li>• <b>Local:</b> pain, swelling, redness, axillary swelling/ tenderness.</li> <li>• <b>Systemic:</b> fatigue, myalgia, headache, arthralgia, chills, nausea/vomiting, fever, irritability/ crying (infants/ children), loss of appetite (infants/ children).</li> </ul>	
STORAGE AND HANDLING	<ul style="list-style-type: none"> <li>• Store in a refrigerator at 2°C to 8°C.</li> <li>• Do not freeze. Do not use vaccine that may have been frozen.</li> <li>• Protect the vaccine from light.</li> </ul>	
<b>REFERENCES AND RESOURCES</b>		
<a href="#">National Advisory Committee on Immunization Statements</a> <a href="#">Canadian Immunization Guide</a> <a href="#">Product Monograph</a>		

<b>Meningococcal C-Conjugate Vaccine</b>		<b>NEISVAC-C®</b>		
<b>Manufacturer</b>	Pfizer Canada Inc	<b>Biological Classification</b>	Inactivated	
<b>Current Formulation</b>	Protection against invasive meningococcal disease caused by Neisseria meningitidis serogroup C.			
<p><b>PRODUCT TRANSITION NOTICE</b>            During transition to meningococcal quadrivalent conjugate vaccine (Men-C-ACYW), Men-C-C vaccine remains the routine product for healthy infants and children until existing supply is depleted.</p>				
<b>INDICATIONS</b>	<b>Publicly Funded Indication</b>	<b>Standard Schedule</b>		
	1. Children presenting 12 months to 11 years (inclusive)	<b>One dose:</b> 0.5 ml IM		
	2. Close contacts of a case of invasive meningococcal group C disease that meet the criteria for chemoprophylaxis who have NOT been previously vaccinated with MCC vaccine as directed by YCDC	<b>2 months to 12 months of age:</b>	<b>12 months of age:</b>	
		<b>Dose 1:</b> 0.5 ml IM and <b>Dose 2:</b> 0.5 ml IM and <b>Dose 3 after 12 months of age:</b> 0.5 ml IM	<b>One dose:</b> 0.5 ml IM	
<b>Minimum spacing is 8 weeks</b>				
<b>CONTRAINDICATIONS</b>	History of anaphylaxis after a previous dose of the vaccine or to any component of the vaccine or its container.			
<b>PRECAUTIONS &amp; SPECIAL CONSIDERATIONS</b>	See Men-C-ACYW135 page for all medically high-risk infants and children			
<b>PREGNANCY AND LACTATION</b>	The safety of the vaccine during pregnancy and lactation has not been established. Consult with YIP/CMOH required.			
<b>INTERCHANGEABILITY</b>	Men-C-C and Men-C-ACYW are interchangeable at the routine 12-month dose for healthy children if Men-C-C is unavailable.			
<b>RECONSTITUTION AND DILUTION</b>	No reconstitution required			

<b>Meningococcal C-Conjugate Vaccine</b>		<b>NEISVAC-C®</b>
<b>ADMINISTRATION</b>	The preferred site for injection is the anterolateral aspect of the thigh in infants or the deltoid muscle of the upper arm in children greater than one year of age. The vaccine should not be injected in the gluteal area or areas where there may be a major nerve trunk and/or blood vessel.	
<b>CONCURRENT ADMINISTRATION WITH OTHER VACCINES</b>	Neisvac may be administered at the same time, or anytime before or after another inactivated or live vaccine.	
<b>SEROLOGICAL TESTING</b>	Serological testing is not recommended before or after immunization.	
<b>VACCINE COMPONENTS</b>	Components: Neisseria meningitidis group C polysaccharide conjugated, tetanus toxoid protein absorbed on aluminium hydroxide.	
<b>APPEARANCE</b>	Upon storage, a white deposit and clear supernatant can be observed. Shake the vaccine well in order to obtain a homogenous suspension.	
<b>BLOOD/ BLOOD PRODUCTS</b>	None	
<b>BOVINE/ PORCINE PRODUCTS</b>	None	
<b>LATEX</b>	Latex Free	
<b>EXPECTED REACTIONS</b>	<ul style="list-style-type: none"> <li>• <b>Local:</b> pain, swelling, redness at injection site, axillary (or groin) swelling/ tenderness.</li> <li>• <b>Systemic:</b> fatigue, myalgia, headache, arthralgia, chills, nausea/vomiting, fever, irritability/ crying (infants/ children), loss of appetite (infants/ children).</li> </ul>	
<b>STORAGE AND HANDLING</b>	<ul style="list-style-type: none"> <li>• Store at 2°C to 8°C.</li> <li>• Do not freeze.</li> <li>• Do not use vaccine after expiration date</li> </ul>	
<b>REFERENCES AND RESOURCES</b>		
<a href="#">Neisvac Monograph</a> <a href="#">National Advisory Committee on Immunization Statements</a> <a href="#">Canadian Immunization Guide</a>		

<b>Meningococcal Quadrivalent Conjugate Vaccine</b>		<b>NIMENRIX®</b>	
<b>Manufacturer</b>	Pfizer Canada, Ltd.	<b>Biological Classification</b>	Non-live: conjugate
<b>Current Formulation</b>	Protection against invasive meningococcal disease caused by <i>Neisseria meningitidis</i> serogroups A, C, Y, and W-135		
<b>PRODUCT TRANSITION NOTICE</b>			
During transition from Men-C-C vaccine to meningococcal quadrivalent conjugate vaccine (Men-C-ACYW), Men-C-C vaccine remains the routine product for healthy infants and children until existing supply is depleted.			
<b>INDICATIONS</b>	<b>Recommended and provided free to:</b>		
	<ul style="list-style-type: none"> <li>• Healthy individuals from 12 to 24 years of age</li> <li>• Individuals 2 months of age and older with high-risk conditions (see Table 2)</li> <li>• Outbreak management under direction of CMOH, YCDC, and YIP</li> </ul>		
	<b>SCHEDULE</b>		
	1. Healthy infants and children between 12 and 23 months of age (inclusive; routinely provided at 12-month visit)	<b>1 Dose:</b> 0.5 mL IM	
	2. Previously unimmunized healthy children 23 months to 11 years of age (catch-up program)	<b>1 Dose:</b> 0.5 mL IM	
	3. Healthy individuals 12 to 24 years of age (routinely provided in Grade 9 program)	<b>1 Dose:</b> 0.5 mL IM	
	4. High-risk infants and children under 2 years of age (see Table 2)	<b>See Table 1 for schedule</b>	
	5. Previously unimmunized high-risk individuals 2 to 55 years of age (see Table 2)	<ul style="list-style-type: none"> <li>• <b>Dose 1:</b> 0.5 mL IM</li> <li>• <b>Dose 2:</b> 0.5 mL IM</li> </ul> <i>Minimum interval between doses: 8 weeks</i>  <b>See Booster dose recommendations for all high-risk individuals (Table 3)</b>	
6. Outbreak management	<b>Follow direction provided by CMOH, YCDC, and YIP.</b>		

**Meningococcal Quadrivalent Conjugate Vaccine** **NIMENRIX®**

**Table 1. Recommended Men-C-ACYW vaccine schedules for high-risk children under 2 years of age**

Age at initiation of series	High-risk individuals
2 to 6 months	<ul style="list-style-type: none"> <li>• <b>Dose 1:</b> 0.5 mL IM</li> <li>• <b>Dose 2:</b> 0.5 mL IM</li> <li>• <b>Dose 3:</b> 0.5 mL IM at <math>\geq 12</math> months of age*</li> </ul> <p>Minimum interval between doses: 8 weeks            *Dose 3 not necessary if dose 2 received after 12 months of age</p>
7 to 23 months	<ul style="list-style-type: none"> <li>• <b>Dose 1:</b> 0.5 mL IM</li> <li>• <b>Dose 2:</b> 0.5 mL IM at <math>\geq 12</math> months of age</li> </ul> <p>Minimum interval between doses: 8 weeks</p>

**Table 2. High risk medical conditions**

- Persons with functional or anatomic asplenia or sickle cell disease
- Hematopoietic Stem Cell Transplant (adult and pediatric).
- Solid organ or islet cell transplant (candidate or recipient).
- Persons with congenital immunodeficiencies such as complement, properdin, factor D, combined T and B cell immunodeficiencies or primary antibody deficiencies
- Persons with acquired complement deficiency due to receipt of the terminal complement inhibitor eculizumab (Soliris™) or ravulizumab (ULTOMIRIS®)
- individuals with HIV, especially if it is perinatally acquired

**Table 3. Booster dose recommendation for high-risk individuals (see Table 2)**

Age at presentation	Booster recommendation
High-risk individuals 6 years of age and younger	0.5 mL IM 3 years after completion of primary series
High-risk individuals 7 years of age and older	0.5 mL IM 5 years after last dose, and every 5 years if risk persists

<b>Meningococcal Quadrivalent Conjugate Vaccine</b>		<b>NIMENRIX®</b>
<b>AVAILABLE FORMAT</b>	<ul style="list-style-type: none"> <li>• Single-dose vial (lyophilized powder with prefilled diluent syringe)</li> <li>• Supplied in cartons of 1 or 10 vials</li> </ul>	
<b>CONTRAINDICATIONS</b>	History of severe allergic reaction (e.g., anaphylaxis) to a previous dose or any component of the vaccine or container	
<b>PRECAUTIONS &amp; SPECIAL CONSIDERATIONS</b>	<ul style="list-style-type: none"> <li>• Minimum interval between Men-C-C and Men-C-ACYW is 4 weeks regardless of order</li> <li>• For close contacts or outbreak control, Men-C-ACYW may be given at any time after Men-C-C if indicated. Consult YCDC.</li> <li>• Individuals previously vaccinated with a meningococcal polysaccharide (non-conjugate) vaccine should receive Men-C-ACYW at least 6 months later.</li> </ul>	
<b>PREGNANCY AND LACTATION</b>	<ul style="list-style-type: none"> <li>• Limited safety data available.</li> <li>• Use only when clearly indicated and benefits outweigh potential risks.</li> </ul>	
<b>INTERCHANGEABILITY</b>	Men-C-C and Men-C-ACYW are interchangeable at the routine 12-month dose for healthy children if Men-C-C is unavailable.	
<b>RECONSTITUTION AND DILUTION</b>	<ol style="list-style-type: none"> <li>1. Reconstitute with entire contents of prefilled diluent syringe.</li> <li>2. Withdraw full 0.5 mL dose.</li> <li>3. Use promptly after reconstitution.</li> </ol>	
<b>ADMINISTRATION</b>	<ul style="list-style-type: none"> <li>• <b>Dose:</b> 0.5 mL</li> <li>• <b>Route:</b> Intramuscular (IM)</li> <li>• <b>Preferred site:</b> <ul style="list-style-type: none"> <li>○ Infants: anterolateral thigh.</li> <li>○ Children ≥1 year and adults: deltoid preferred.</li> <li>○ Do not administer in the gluteal area.</li> </ul> </li> </ul>	

<b>Meningococcal Quadrivalent Conjugate Vaccine</b>		<b>NIMENRIX®</b>
<b>CONCURRENT ADMINISTRATION WITH OTHER VACCINES</b>	May be administered at the same time as, or any time before or after, live or inactivated vaccines.	
<b>SEROLOGICAL TESTING</b>	Not recommended before or after vaccination.	
<b>VACCINE COMPONENTS</b>	<ul style="list-style-type: none"> <li>• <b>Active ingredients:</b> Neisseria meningitidis polysaccharides (groups A, C, W-135, Y) 5 mcg each, conjugated to tetanus toxoid carrier protein 44 mcg.</li> <li>• <b>Non-medicinal ingredients:</b> sodium chloride, sucrose, trometamol, water for injection.</li> </ul>	
<b>APPEARANCE</b>	<ul style="list-style-type: none"> <li>• Lyophilized white powder prior to reconstitution.</li> <li>• Clear, colourless solution after reconstitution.</li> <li>• Discard if particulate matter or discoloration observed.</li> </ul>	
<b>BLOOD/ BLOOD PRODUCTS</b>	Does not contain human blood or blood products.	
<b>BOVINE/ PORCINE PRODUCTS</b>	Components of bovine and porcine origin used early in manufacturing process.	
<b>LATEX</b>	Product and packaging components are latex free.	
<b>EXPECTED REACTIONS</b>	<ul style="list-style-type: none"> <li>• <b>Local:</b> pain, swelling, redness at injection site, axillary (or groin) swelling/ tenderness.</li> <li>• <b>Systemic:</b> fatigue, myalgia, headache, arthralgia, chills, nausea and vomiting, fever, irritability or crying and loss of appetite (infants and children).</li> </ul>	

**Meningococcal Quadrivalent Conjugate Vaccine** **NIMENRIX®**

<b>STORAGE AND HANDLING</b>	<b>Storage</b>
	<ul style="list-style-type: none"> <li>• Store at 2 to 8 °C</li> <li>• Do not freeze</li> <li>• Protect from light</li> <li>• Diluent may be stored at room temperature</li> </ul>
	<b>Handling</b>
	<ul style="list-style-type: none"> <li>• Use promptly</li> <li>• Discard if frozen, particulate matter, or discoloration observed</li> </ul>

**REFERENCES AND RESOURCES**

- [Nimenrix Monograph](#)
- [National Advisory Committee on Immunization Statements](#)
- [Canadian Immunization Guide](#)