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Fact Sheet

Meningococcal Group C Conjugate Vaccine – *Menjugate*

1. *What is meningococcal disease and what are the complications of this disease?*

Meningococcal disease is caused by a bacteria called *Neisseria meningitidis*. There are many different groups or types of this bacteria which can cause disease and each type is identified by a letter and/or number. This bacteria can cause infection of joints (septic arthritis), blood (bacteremia or septicemia), the lining of the heart (pericarditis), the lung (pneumonia) or the brain (meningitis).

The most common illness caused by this bacteria is meningitis and there have been outbreaks of meningococcal meningitis in several Canadian provinces since 1989. This bacteria was responsible for the outbreak of bacterial meningitis in PEI in 1990 to 1992 when there were three deaths among young adults. However, this disease is most common in Canada among children under four years of age.

2. *What are the contents of the vaccine?*

This is an inactivated vaccine containing portions of the meningococcal C bacteria conjugated to a carrier protein from diphtheria. This component of the vaccine is responsible for stimulating the body to make antibodies to meningococcal C bacteria, which results in protection for the vaccinated person. In addition, the vaccine contains mannitol, sodium phosphate monobasic monohydrate and sodium phosphate dibasic heptahydrate, aluminum hydroxide adjuvant and sodium chloride in sterile water. These components serve to increase the way the body produces antibodies. There is no preservative and no mercury in the vaccine.

This vaccine protects against meningococcal C disease and not other types of disease and is the only meningococcal vaccine that is effective for those under two years of age. All vaccine contents are licensed for use by Health Canada. A complete listing of contents is included in the product insert which is available from the public health nurse.

3. What are the possible reactions from the vaccine and how are they managed?

The most serious but rare side effect is a severe allergic reaction (anaphylaxis) which can be life threatening and occurs within 15 to 20 minutes of receiving the vaccine. Procedures are in place to quickly respond to anaphylaxis. Public health nurses are trained to treat the condition by giving adrenaline and closely monitoring the situation.

The most common side effects after receiving the vaccine are tenderness, redness and swelling at the site where the vaccine is given. Children around 12 months of age may have the following after the vaccine: irritability, sleepiness, change in eating habits, diarrhea, vomiting, high pitched cry or persistent crying. Fever and rash are rare. Those 12-14 years of age are more likely to have flu-like symptoms including chills, nausea, malaise, muscle aches and pains, joint pain or headache. Temperature is very rare and fewer than 10% have symptoms severe enough to result in them having to stay at home.

It is not necessary to give acetaminophen (e.g. Tylenol or Tempra) with every immunization. However, if your child is experiencing discomfort or fever, acetaminophen can relieve these symptoms.

- 1. Please remain in the waiting room for 15 minutes after immunization.**
- 2. See a doctor or seek medical attention if your child has any serious side effects.**
- 3. Report serious reactions to the public health nurse whenever they occur.**

4. What are the situations in which Menjugate should not be given?

The vaccine should not be given if a person is ill with an acute infection or a fever but can be given when a person has a cold or chest or ear infection if there is no fever. The vaccine should not be given to anyone who has had an allergic reaction to anything which is in this vaccine.

5. What are the risks if the vaccine is not received?

The chance of getting meningococcal disease varies greatly from time to time and an outbreak can occur without warning. There is an average of over 100 cases of group C meningococcal disease in Canada each year with an increased number of cases in those areas when an outbreak occurs.

This vaccine has been reported to provide protection against meningococcal C disease to 92% of toddlers and 97% of adolescents who have received it. From information now available, a booster of this vaccine will not be needed.