



NATIONAL LGBTQIA+ HEALTH  
EDUCATION CENTER

A PROGRAM OF THE FENWAY INSTITUTE



# Meningococcal Disease Outbreak in Florida Primarily among Men who Have Sex with Men

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Sam Crowe, PhD, MPH

Meningitis and Vaccine Preventable Diseases Branch

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# Our Roots

## Fenway Health

- Independent 501(c)(3) FQHC
- Founded 1971
- Mission: To enhance the wellbeing of the LGBTQIA+ community as well as people in our neighborhoods and beyond through access to the highest quality health care, education, research, and advocacy
- Integrated primary care model, including HIV and transgender health services

## The Fenway Institute

- Research, Education, Policy



# LGBTQIA+ Education and Training

The National LGBTQIA+ Health Education Center offers educational programs, resources, and consultation to health care organizations with the goal of providing affirmative, high quality, cost-effective health care for lesbian, gay, bisexual, transgender, queer, intersex, asexual, and all sexual and gender minority (LGBTQIA+) people.

- Training and Technical Assistance
- Grand Rounds
- Online Learning
  - Webinars, Learning Modules
  - CE, and HEI Credit
- ECHO Programs
- Resources and Publications

[www.lgbtqiahealtheducation.org](http://www.lgbtqiahealtheducation.org)

[education@fenwayhealth.org](mailto:education@fenwayhealth.org)



# Technical Questions?

- Please call Zoom Technical Support: 1.888.799.9666 ext 2
- You can contact the webinar host using the chat function in Zoom. Click the “Chat” icon, and type your question.
- Alternatively, e-mail us at [education@fenwayhealth.org](mailto:education@fenwayhealth.org) for less urgent questions

# Sound Issues?

- Ensure your computer speakers are not muted
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- Choose “I will call in.”
- Dial the phone number and access code

# After the Webinar

- Close the browser, and an evaluation will automatically open for you to complete
- We very much appreciate receiving feedback from all participants
- Completing the evaluation is required to obtain a CME certificate

# CME/CEU Information

This activity has been reviewed and is acceptable for up to 1.0 Prescribed credits by the American Academy of Family Physicians. Participants should claim only the credit commensurate with the extent of their participation in this activity.

<p><b>Physicians</b></p>	<p>AAFP Prescribed credit is accepted by the American Medical Association as equivalent to AMA PRA Category 1 Credit™ toward the AMA Physician’s Recognition Award. When applying for the AMA PRA, Prescribed credit earned must be reported as Prescribed, not as Category 1.</p>
<p><b>Nurse Practitioners, Physician Assistants, Nurses, Medical Assistants</b></p>	<p>AAFP Prescribed credit is accepted by the following organizations. Please contact them directly about how participants should report the credit they earned.</p> <ul style="list-style-type: none"> <li>•American Academy of Physician Assistants (AAPA)</li> <li>•National Commission on Certification of Physician Assistants (NCCPA)</li> <li>•American Nurses Credentialing Center (ANCC)</li> <li>•American Association of Nurse Practitioners (AANP)</li> <li>•American Academy of Nurse Practitioners Certification Program (AANPCP)</li> <li>•American Association of Medical Assistants (AAMA)</li> </ul>
<p><b>Other Health Professionals</b></p>	<p>Confirm equivalency of credits with relevant licensing body.</p>

# Topics for Today

- Background on *Neisseria meningitidis* and meningococcal disease
- Description of the ongoing outbreak
- Vaccine recommendations

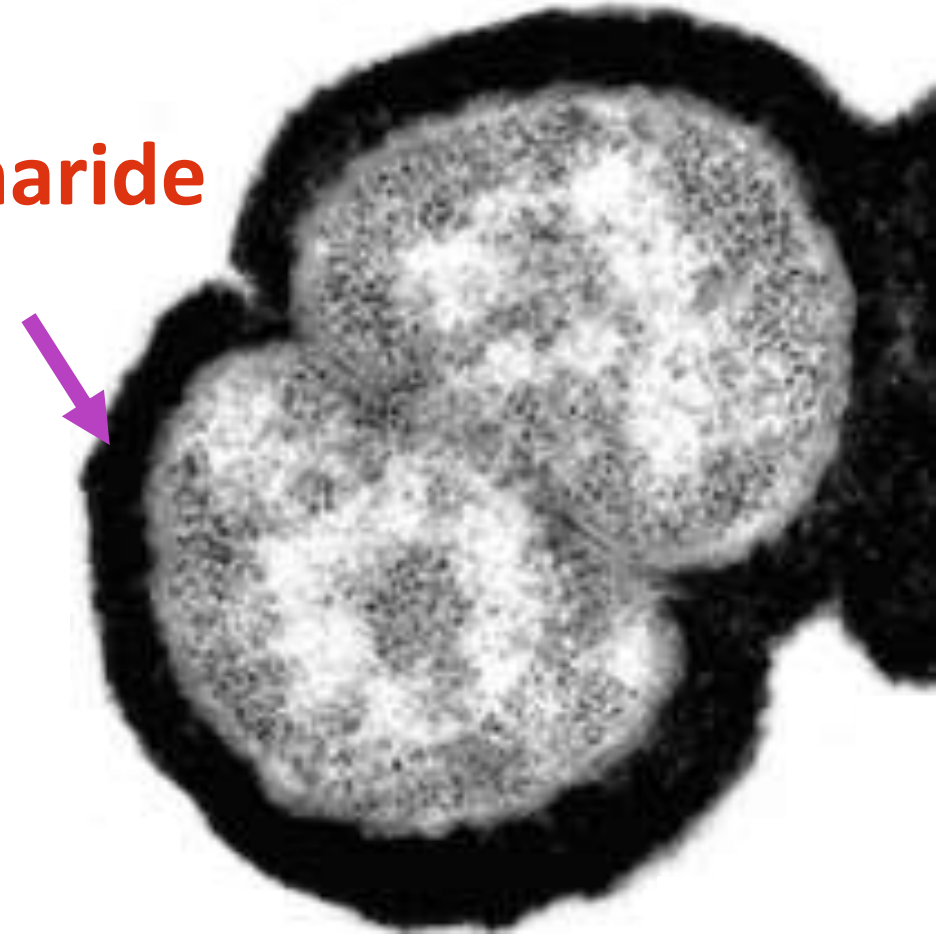


# The Pathogen and the Disease

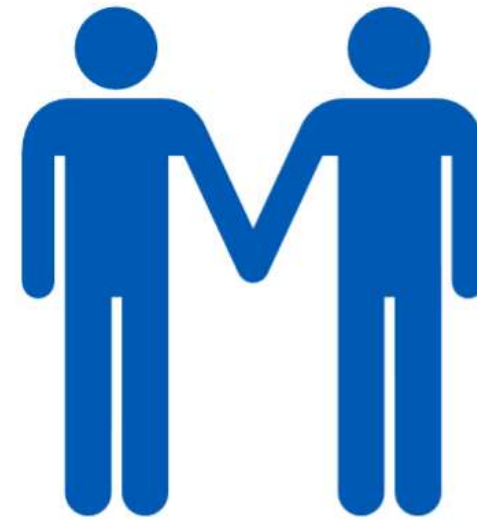
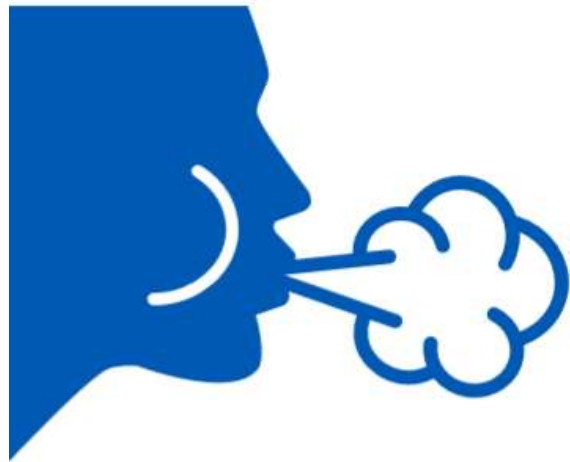
# *Neisseria Meningitidis* Is Classified by Its Polysaccharide Capsule

- Important virulence factor for pathogenesis and invasiveness
- 6 serogroups cause most invasive disease worldwide (A, B, C, W, X, and Y)
- Non-groupable Nm are typically not invasive

**Polysaccharide capsule**



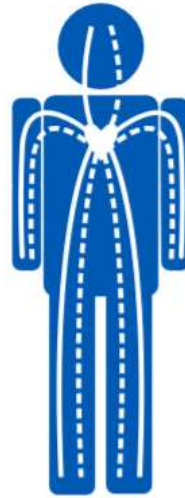
# Meningococcal Disease is Transmitted Person-to-Person



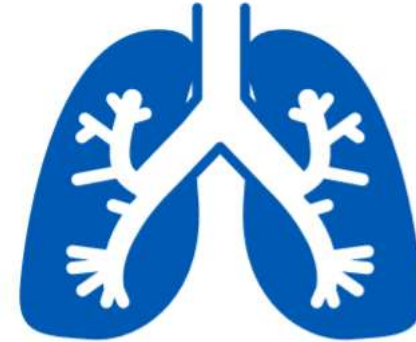
# Invasive Meningococcal Disease Has Three Main Clinical Presentations



Meningitis



Bacteremia



Pneumonia

# Early Meningococcal Disease Symptoms Are Non-Specific



# Early Meningococcal Disease Symptoms Are Non-Specific



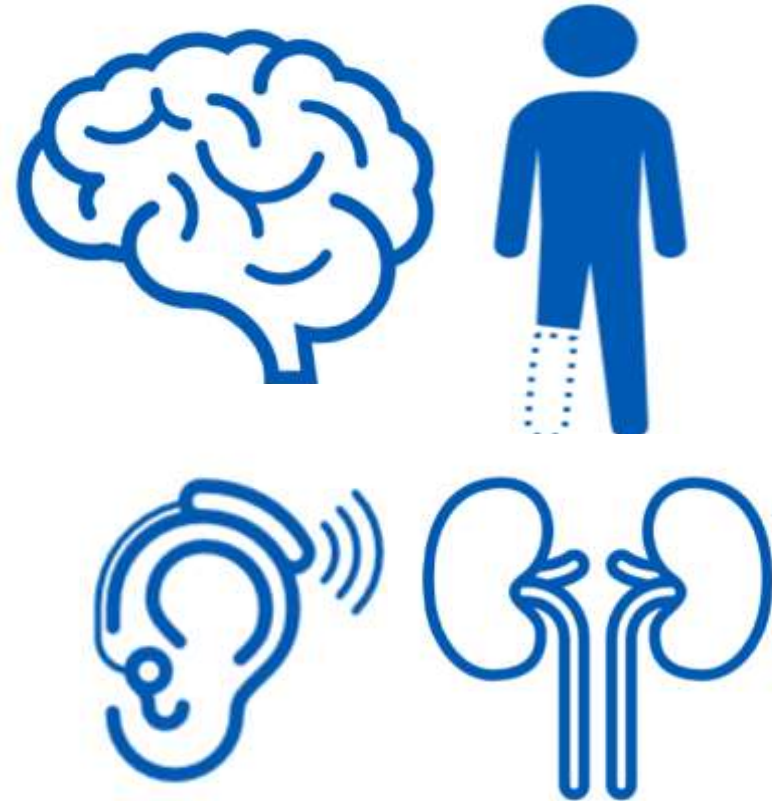
But invasive disease can progress rapidly

# Mortality and Morbidity Are High

- ~10–15% of cases are fatal

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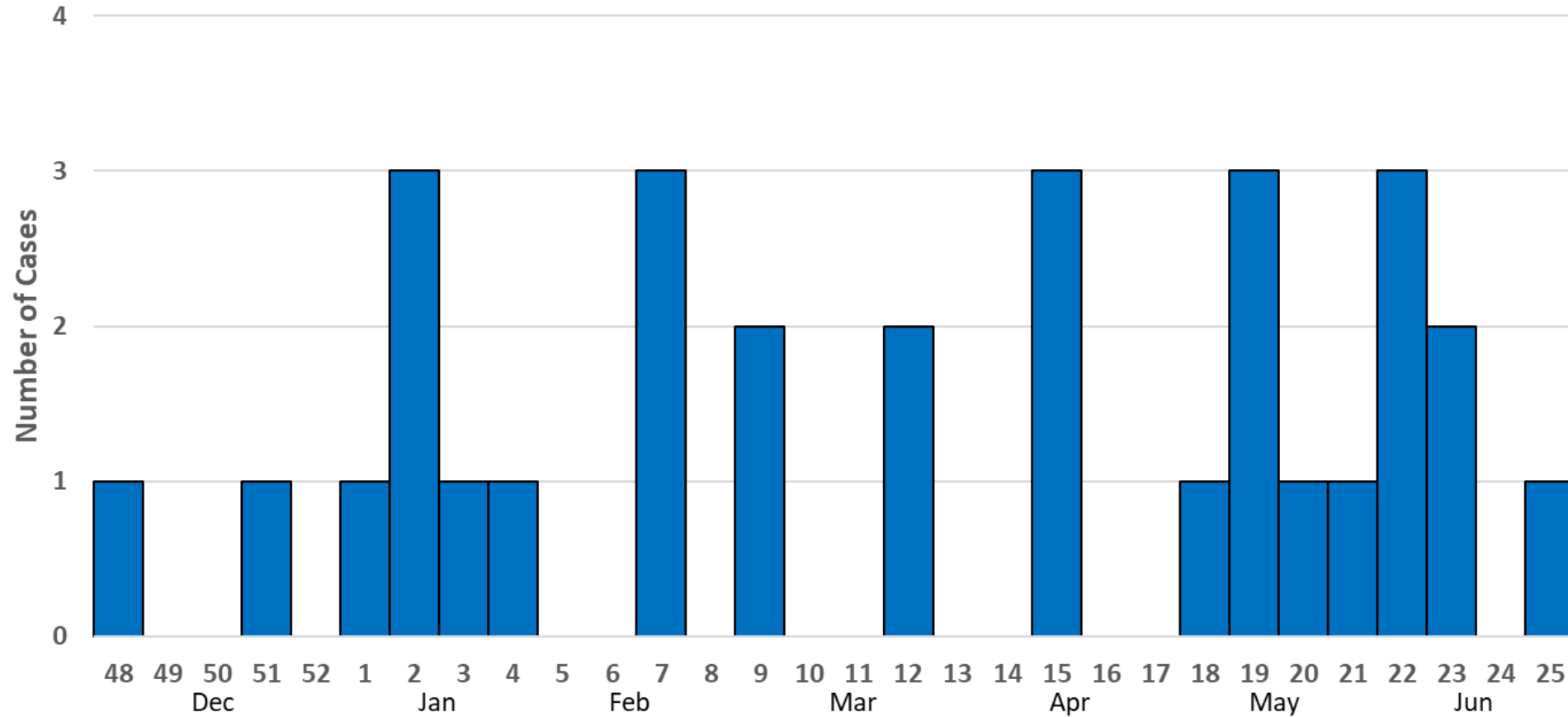
- ~10–15% of cases are fatal
- 10–20% of survivors have permanent sequelae





# The Outbreak

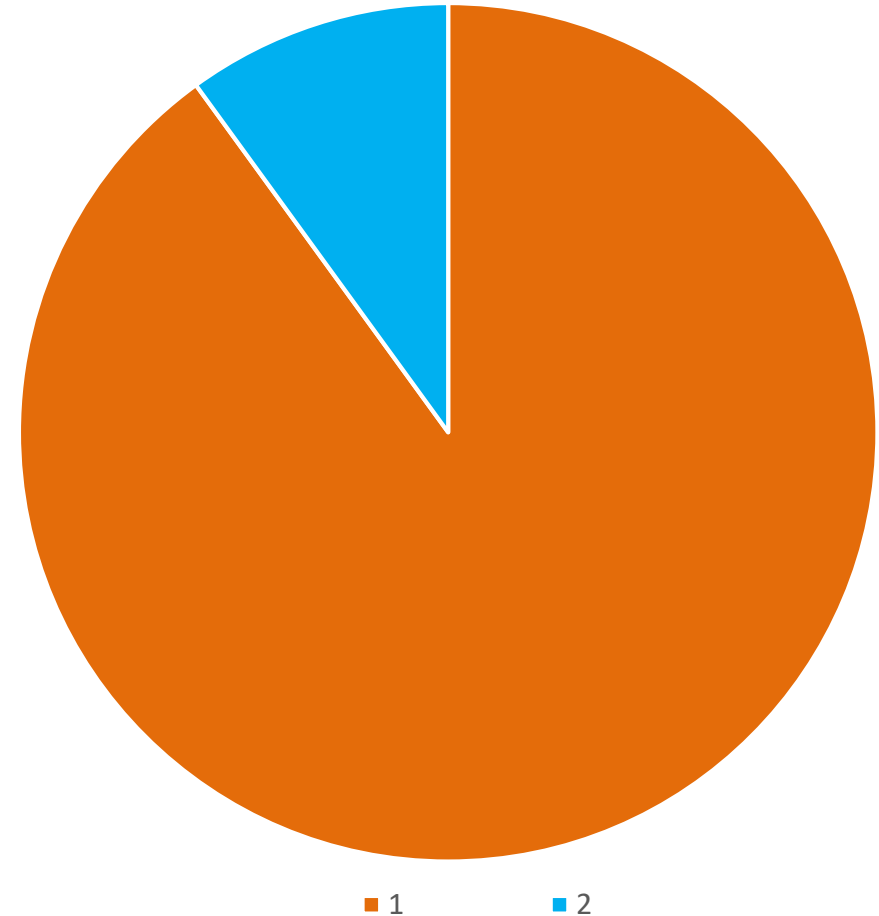
# Epidemic Curve



Onset Date by Epi Week (Dec 2021 – June 2022)

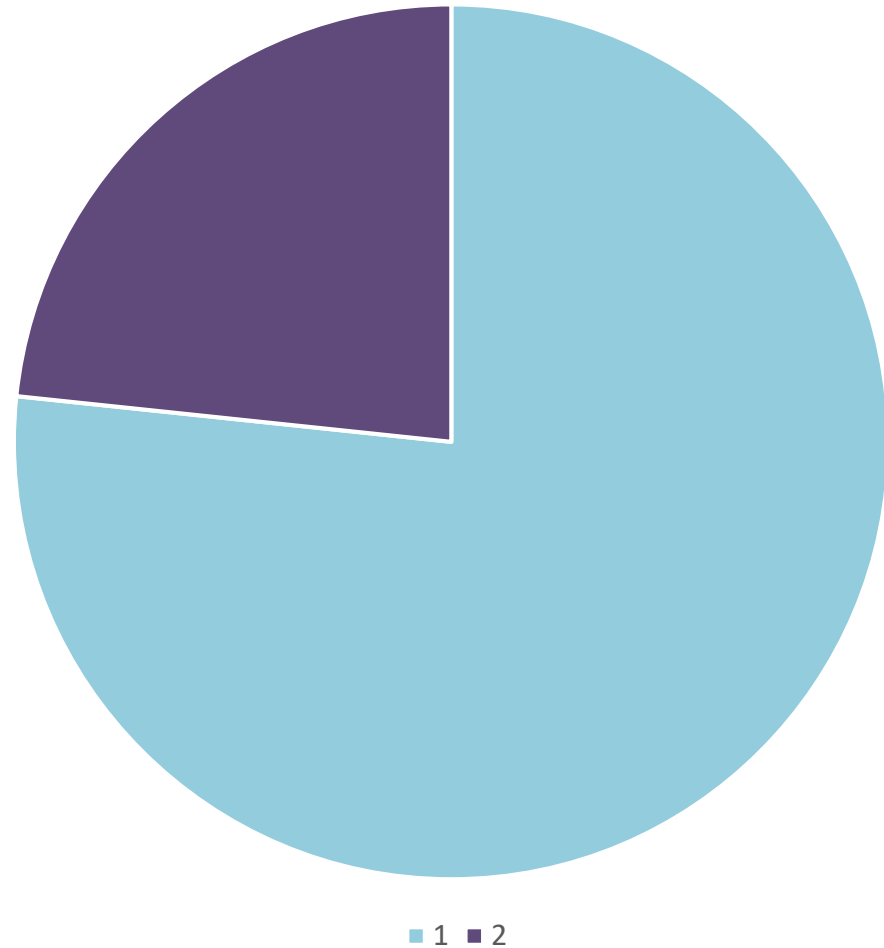
# Outbreak Summary — December 2021 to June 2022

- 30 cases total
- 90% (27/30) are men who sleep with men (MSM)



# Outbreak Summary — December 2021 to June 2022

- 23% (7/30) have died
- 86% (6/7) were MSM



# Additional Outbreak Facts

- 18/30 (60%) of the patients are Hispanic
- 11/30 (37%) are people living with HIV
  - 6/11 are Hispanic
- Affected travelers
  - One infected FL resident traveled to another state and became ill there
  - One resident from another state traveled to FL and became infected

Tree scale: 0.1

ST(inner strip)

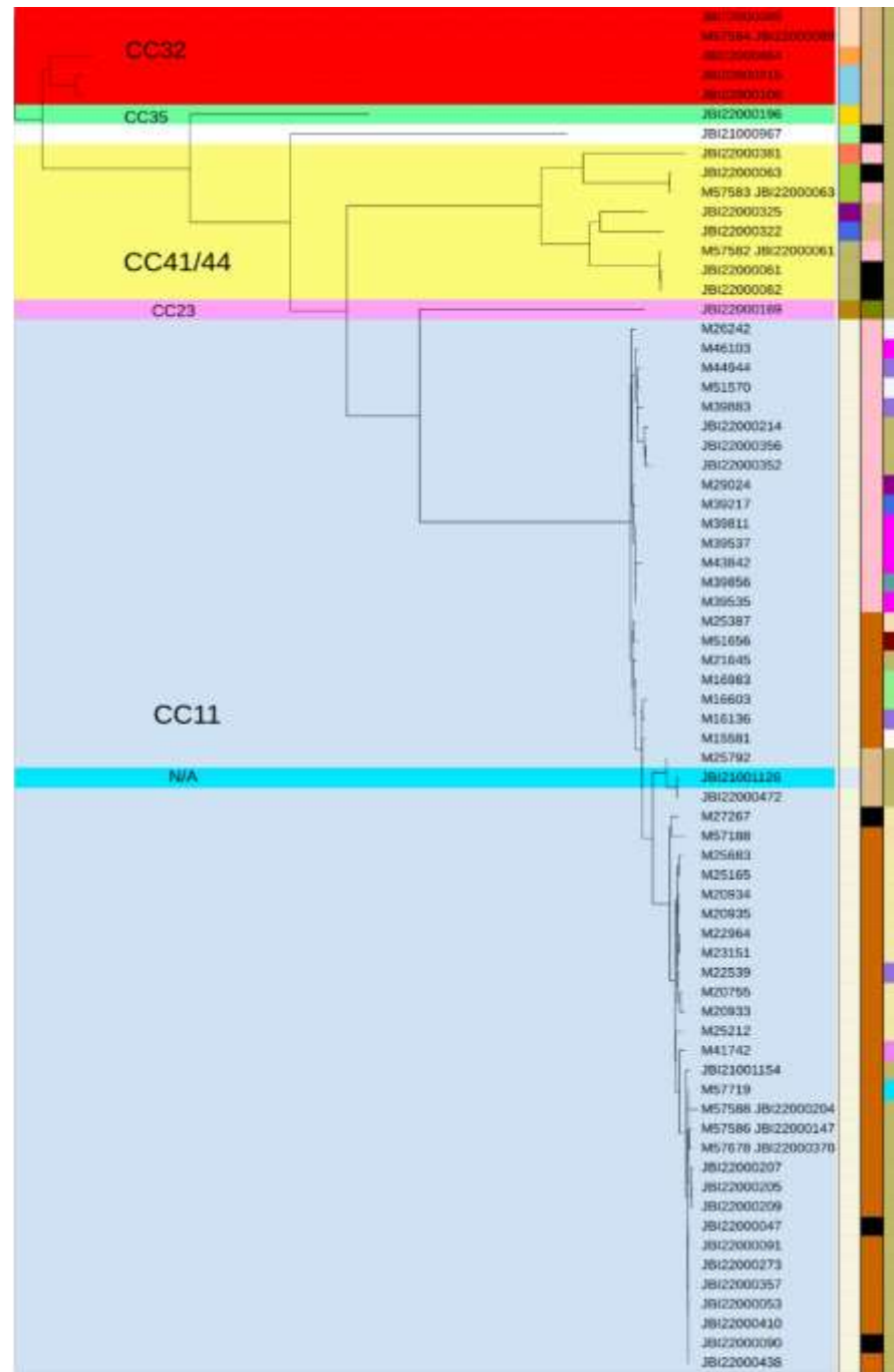
- New
- ST11
- ST32
- ST34
- ST35
- ST3587
- ST485
- ST571
- ST897
- ST2578
- ST13470
- ST409
- ST11026

States(outer strip)

- California
- Florida
- Georgia
- Illinois
- Kentucky
- Maryland
- Massachusetts
- Nevada
- New Jersey
- New York
- Pennsylvania
- Tennessee
- Virginia
- Hawaii

Serogroup(middle strip)

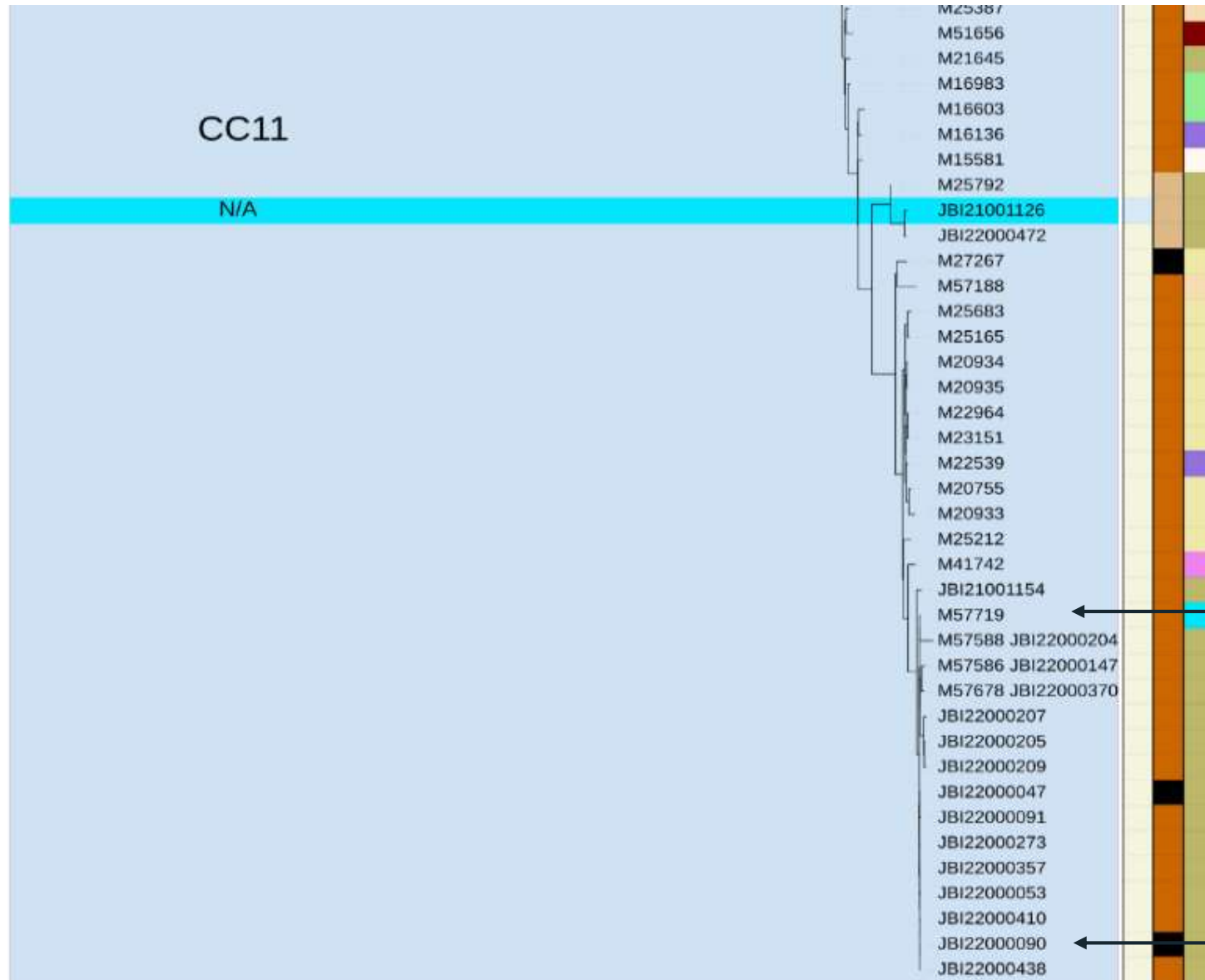
- B
- C
- Inconclusive
- NG
- Y



# Phylogenetic Tree of Outbreak

MSM Outbreak (NmC, ST-11/CC11)





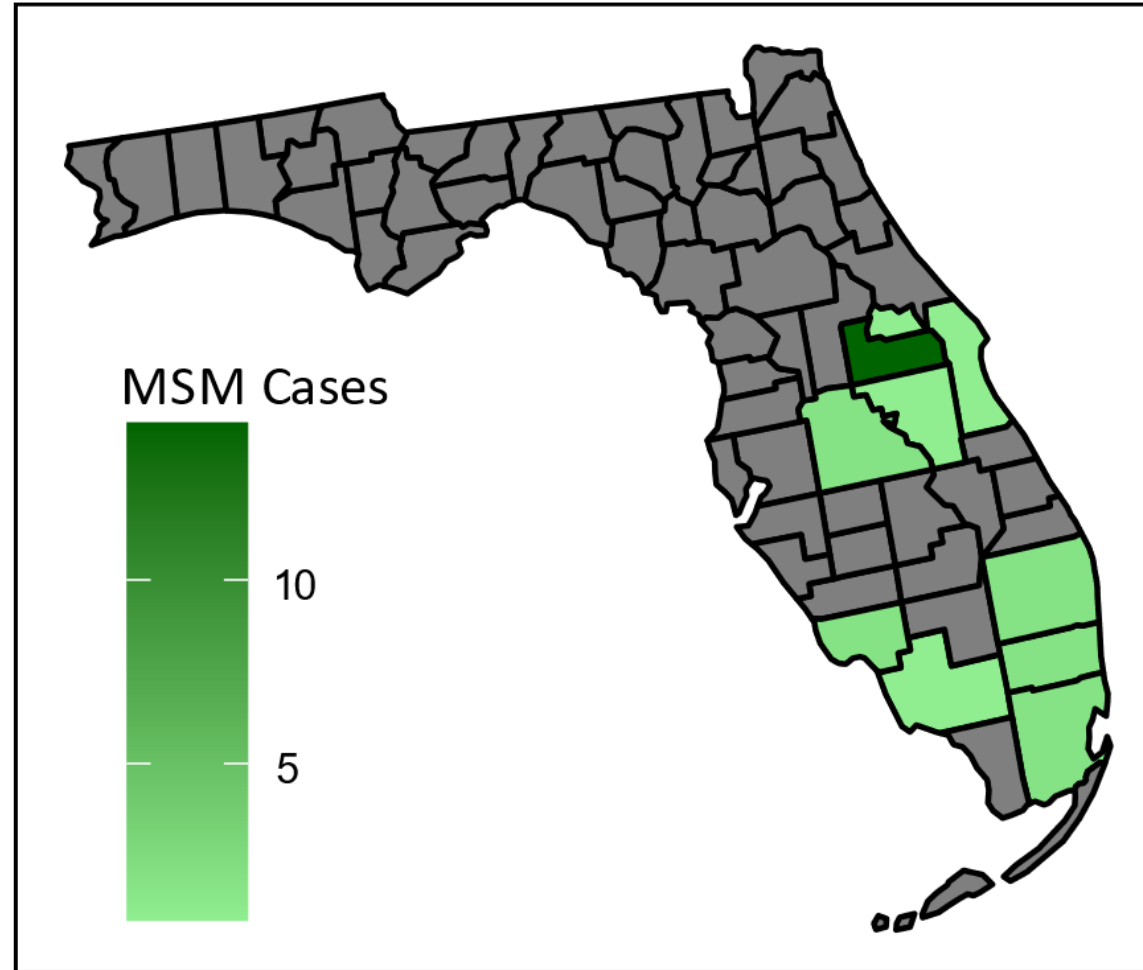
# Phylogenetic Tree of Outbreak

Isolate submitted by HI, FL resident

MSM Outbreak (NmC, ST-11/CC11)

Isolate submitted by FL, non-FL resident

# Cases by County





# Historical Context: Recent Serogroup C Outbreaks among MSM, 2010–2018

Location	Cases (deaths)	Outbreak period
New York City	22 (7)	Aug 2010 – Feb 2013
Los Angeles County	10 (4)	Oct 2012 – Dec 2014
Chicago	9 (1)	May 2015 – Mar 2016
Miami	5 (2)	Sep 2016 – Apr 2017
Southern California	24 (3)	Mar 2016 – Jan 2018

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<b>Florida</b>	<b>27 (6)</b>	<b>Dec 2021 – present</b>

# Communication Activities

- CDC press release on June 22
- Partner outreach
  - National Coalition of STD Directors
  - National Association of County and City Health Officials
  - Florida Pride event organizers
  - HIV.gov
  - HRSA Florida PCA network
  - Fenway Health
  - Pharmacies (NCPA, NACDS, FMI, Publix, CVS)

# Communication Activities

- Web, social, and digital communications in English and Spanish
  - Outbreak website
  - Social media messages on multiple CDC channels
  - Paid digital campaign reaching MSM in Florida
  - Alerts on dating apps



**ENFERMEDAD MENINGOCÓCICA**  
Busca atención médica de inmediato si tienes síntomas.

**SÍNTOMAS COMUNES**

- Fiebre o escalofríos
- Dolor de cabeza
- Rigidez en el cuello
- Náuseas, vómitos o diarrea
- Fotofobia (mayor sensibilidad de los ojos a la luz)
- Alteración del estado mental (confusión)
- Fatiga (sentirse cansado)
- Manos y pies fríos
- Dolores fuertes en los músculos, las articulaciones, el pecho o el abdomen (barriga)
- Respiración rápida
- En las etapas más avanzadas, un sarpullido morado oscuro

[cdc.gov/meningococcal](https://www.cdc.gov/meningococcal)

**CDC** May 27

Traveling to Florida for Pride events? If you're a gay or bisexual man, talk with your healthcare provider about getting a meningococcal vaccine (MenACWY). MenACWY vaccination is also routinely recommended for all people living with HIV.

There's an outbreak of meningococcal disease in Florida. This outbreak is primarily affecting gay, bisexual, and other men who have sex with men (with and without HIV). Learn more about the outbreak and vaccine: <https://bit.ly/35Ugzmo>.

**Prevent Meningococcal Disease**

# Vaccine Recommendations

# Who Should Be Vaccinated?

- Gay, bisexual, and other men who have sex with men should
  - Get a MenACWY vaccine if they live in Florida
  - Talk with their healthcare provider about getting a MenACWY vaccine if they are thinking about traveling to Florida
  - All should receive a MenACWY booster dose if five years have elapsed since last dose
- In addition, MenACWY vaccination is routinely recommended for all people with HIV in the United States
- MSM should receive 1 dose; people with HIV should receive two dose series and a booster dose every 5 years thereafter

# MenACWY Vaccines Available in United States

- Menactra, Menveo, and MenQuadfi — any can be used during this outbreak
  - Menactra and Menveo licensed through 55 years of age, but can be administered to people 56 years of age or older at increased risk
  - MenQuadfi is licensed for people 2 years of age or older
- You can administer MenACWY and other indicated vaccines, including monkeypox vaccine, during the same visit
  - Give the vaccines at a different injection site, if feasible, and with a separate syringe

# Insurance Coverage

- For those who have it
  - Insurance providers should pay for meningococcal vaccination for the population at risk during the outbreak
- For those who do not
  - Refer them to their county health department where they should be able to get it free of charge



# Key Takeaway Points

- There is a large, ongoing meningococcal disease outbreak occurring among MSM in Florida
- CDC is recommending
  - MSM who live in Florida get vaccinated with a MenACWY vaccine
  - MSM who are thinking about travelling to Florida speak with their healthcare provider about getting vaccinated
- Insurance providers should pay for meningococcal vaccination during this outbreak
- The uninsured should go to their county health department where they should be able to get vaccinated for free

# Thank You

For more information, contact CDC  
1-800-CDC-INFO (232-4636)  
TTY: 1-888-232-6348 [www.cdc.gov](http://www.cdc.gov)

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.