

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/vaccination/role-vaccination-meningitis-b-prevention/54382/>

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The Role of Vaccination in Meningitis B Prevention

Announcer:

Welcome to *VacciNation* on ReachMD. On this episode, we're joined by Dr. Paul Offit, who's the Director of the Vaccine Education Center and a member in the Division of Infectious Diseases at Children's Hospital of Philadelphia. He'll be discussing the importance of having conversations about meningitis B vaccination. Let's hear from Dr. Offit now.

Dr. Offit:

So this vaccine, the meningococcal serogroup B vaccine, is given late in adolescence—between 16 and 18 years of age—as a two-dose vaccine. It's given to prevent a serious and occasionally deadly infection. That's not common in this country, but it's common enough that preventing it matters.

A choice not to get a vaccine is not a risk-free choice. It's a choice to take a different and more serious risk. And although we think that these kinds of bacterial infections are never going to happen to us or our children, every year they do at some level. So your job as a parent is to put your child in the safest position possible, and that's what vaccines do: they put children in a safe position.

I think most people don't realize the importance of meningococcal serogroup B vaccine. They have a vague notion that there's a meningitis vaccine out there, but they don't really distinguish among them. For example, there's the other serogroup, ACWY, that's given earlier in early adolescence: 10 to 11 years of age. This one's given later, because it's often contracted around college when you're kissing, when you're sharing vapes, or when you're sharing beverages. And so for that reason, the vaccine is given in that 16 to 18-year-old age group.

So it's before you go to college or before you go to any sort of position where you're going to be, in close association with other people. If you join the Army and you're in an Army barracks of 60 people, you benefit from this vaccine. So that's why it's given when it's given.

And I think people need to realize that this bacteria is out there, and that every year it causes up to 100 children to suffer and occasionally die, and that we have a way to prevent it. Finally, we have a way to prevent it.

It's just really a protein vaccine. It depends—there's two different meningococcal B vaccines—but they, in both cases, contain meningococcal proteins—just a handful of meningococcal proteins. So it's not the whole bacteria, it's not a weakened form of the whole bacteria; it's just a few proteins taken from the bacteria that can protect your child fully from an infection, which can be fatal. So it's a safe vaccine. It's been well tested. It's been out for years. We know it works. We know it's safe, and this is a way you can put your child in a safe position.

Announcer:

That was Dr. Paul Offit sharing his insights on how meaningful vaccine conversations can support meningitis B prevention. To access this and other episodes in our series, visit *VacciNation* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!