



MenB can take them out of the game.
Are you sure your teen or young adult is protected?

Is your child at risk?

The following are some factors that could put your child at increased risk of meningococcal group B disease, commonly known as MenB.¹⁻⁴

Yes No

- Is your child between the ages of 16 and 23?
- Does your child share cups and utensils with friends or family?
- Is your child planning on or currently living in close quarters with others, like in a dorm or at a camp?
- Does your child participate in sports teams or other group activities?

Why vaccination is IMPORTANT

Although uncommon, MenB may lead to^{5,6}

- Brain damage
- Hearing or vision loss
- Loss of limbs
- Death within 24 hours

If you answered “Yes” to any of the questions above, your child could be at increased risk for this uncommon but potentially deadly bacterial infection.⁷ The good news is you can help protect him or her. **Talk to a health care provider or pharmacist about vaccinating your child with TRUMENBA.**

INDICATION

- Trumenba is a vaccine indicated for individuals 10 through 25 years of age for active immunization to prevent invasive disease caused by *Neisseria meningitidis* group B
- The effectiveness of the two-dose schedule of Trumenba against diverse *N meningitidis* group B strains has not been confirmed

SELECTED SAFETY INFORMATION

- Trumenba should not be given to anyone with a history of a severe allergic reaction after a previous dose of Trumenba

Please see full Important Safety Information on next page, and click [here](#) for full Prescribing Information.

Visit www.TRUMENBA.com for more information.

 **Trumenba**[®]
Meningococcal Group B Vaccine

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IMPORTANT SAFETY INFORMATION

- Trumenba should not be given to anyone with a history of a severe allergic reaction after a previous dose of Trumenba
- Some individuals with weakened immune systems may have a reduced immune response
- Persons with certain complement deficiencies and persons receiving treatments such as Soliris® (eculizumab), are at increased risk for invasive disease caused by *Neisseria meningitidis* group B even with receipt of vaccination with Trumenba
- As with any vaccine, vaccination with Trumenba may not protect all vaccine recipients against *N meningitidis* group B infections
- Fainting can occur in association with administration of injectable vaccines, including Trumenba
- The most common adverse reactions in adolescents and young adults were pain at injection site, fatigue, headache, and muscle pain. Nausea was reported in adolescents in early phase studies
- Data are not available on the safety and effectiveness of using Trumenba and other meningococcal group B vaccines interchangeably to complete the vaccination series
- Tell your health care provider if you are pregnant, or plan to become pregnant
- Ask your health care provider about the risks and benefits of Trumenba. Only a health care provider can decide if Trumenba is right for you or your child

Please click [here](#) for full Prescribing Information.

You are encouraged to report negative side effects of vaccines to the US Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC). Visit www.vaers.hhs.gov or call 1-800-822-7967.

www.TRUMENBA.com

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References: 1. Tully J, Viner RM, Coen PG, et al. Risk and protective factors for meningococcal disease in adolescents: matched cohort study. *BMJ*. 2006;332(7539):445-450. 2. Centers for Disease Control and Prevention. Meningococcal disease. Centers for Disease Control and Prevention website. <http://www.cdc.gov/meningococcal/index.html>. Updated March 28, 2017. Accessed May 15, 2017. 3. Dwiilow R, Fanella S. Invasive meningococcal disease in the 21st century—an update for the clinician. *Curr Neurol Neurosci Rep*. 2015;15(2):1-9. 4. Ewald AJ, McKeag DB. Meningitis in the athlete. *Curr Sports Med Rep*. 2008;7(1):22-27. 5. Bettinger JA, Scheifele DW, Le Saux N, et al. The disease burden of invasive meningococcal serogroup B disease in Canada. *Pediatr Infect Dis J*. 2013;32(1):e20-e25. 6. Thompson MJ, Ninis N, Perera R, et al. Clinical recognition of meningococcal disease in children and adolescents. *Lancet*. 2006;367(9508):397-403. 7. Soeters HM, McNamara LA, Whaley M, et al. Serogroup B meningococcal disease outbreak and carriage evaluation at a college—Rhode Island, 2015. *MMWR*. 2015;64(22):606-607.