## Significant events in meningococcal vaccination practice in Australia

| Year | Month | Intervention |
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| 1991 | | A single dose of meningococcal ACWY polysaccharide vaccine recommended for<br>at-risk individuals: travellers to countries with frequent epidemics; close contacts in outbreaks of serogroup A, C, W-135 or Y; pilgrims attending the hajj; and persons aged >2 years with high-risk medical conditions (functional or anatomical asplenia, complement disorders). The need for revaccination to be assessed after 2–3 years |
| 2000 | March | In at-risk individuals, revaccination with meningococcal ACWY polysaccharide vaccine recommended after 3–5 years |
| 2001 | June | Meningococcal C conjugate vaccine registered for use in individuals aged ≥6 weeks |
| 2002 | August | Two more meningococcal C conjugate vaccines registered for use in individuals aged ≥6 weeks |
| 2003 | January | Meningococcal C conjugate vaccine recommended and funded for children at 12 months of age<br>Funded national meningococcal C vaccination catch-up program commenced for all children aged 1–19 years |
| | September | Meningococcal C conjugate vaccine recommended for at-risk individuals: close contacts in outbreaks of serogroup C and persons aged >6 weeks with high-risk medical conditions (functional or anatomical asplenia, complement disorders). Doses required vary according to age<br>At-risk group expanded to include laboratory personnel who frequently handle *Neisseria meningitides* |
| 2008 | January | At-risk group expanded to include close contacts aged ≥2 years of cases of serogroup A, W-135 or Y and close contacts aged >2 months of cases of serogroup C. Doses of meningococcal C conjugate vaccine required vary according to age<br>Recommended age for vaccination with meningococcal ACWY polysaccharide vaccine in individuals with high-risk medical conditions lowered from >2 years to ≥2 years |
| | June | National meningococcal C catch-up program completed |
| 2010 | June | Combined Hib (PRP-T) and meningococcal serogroup C vaccine registered for use in children aged <2 years |
| | November | Combined Hib (PRP-T) and meningococcal serogroup C vaccine included on the NIP list of vaccines but not in use |
| 2011 | July | Meningococcal ACWY diphtheria toxoid (DT) conjugate vaccine registered for use in individuals aged 2–55 years |
| 2012 | May | Meningococcal ACWY $CRM_{197}$ conjugate vaccine registered for use in individuals aged ≥11 years |

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| 2013 | March | High-risk medical group expanded to include persons treated with eculizumab and those post-haematopoietic stem cell transplant (HSCT)<br>Meningococcal ACWY conjugate vaccine recommended for at-risk individuals aged ≥9 months, in preference to meningococcal ACWY polysaccharide vaccine. Doses required vary according to age<br>A booster dose of meningococcal ACWY conjugate vaccine recommended every 5 years for at-risk individuals (with the exception of persons ≥9 months with a medical risk, previously vaccinated with meningococcal ACWY polysaccharide vaccine, for whom first booster dose recommended after 3 years) |
| | July | Combined Hib and meningococcal serogroup C vaccine funded for infants aged 12 months |
| | August | Multicomponent recombinant meningococcal B vaccine registered for use in individuals aged ≥2 months – vaccine not available in Australia<br>Meningococcal ACWY tetanus toxoid (TT) conjugate vaccine registered for use in individuals aged 1–55 years |
| 2014 | March | Multicomponent recombinant meningococcal B vaccine available on private prescription |
| | April | Multicomponent recombinant meningococcal B vaccine recommended for children aged <24 months, adolescents aged 15–19 years, children and adults with high-risk medical conditions and laboratory personnel who frequently handle *Neisseria meningitides.* Doses required vary according to age |
| | July | Multicomponent recombinant meningococcal B vaccine recommended for close contacts in outbreaks of serogroup B and close contacts within a household with at least two serogroup B cases. Doses required vary according to age<br>High-risk medical group expanded to include persons infected with HIV<br>A booster dose of meningococcal ACWY conjugate vaccine recommended every 5 years for at-risk individuals aged ≥7 years. For those at-risk individuals aged <7 years, the first booster dose is recommended after 3 years, then every 5 years thereafter |
| 2015 | July | One meningococcal C conjugate vaccine ceased to be available in Australia |
| 2016 | December | Meningococcal ACWY conjugate vaccine funded by WA for all children aged 0–4 years and adolescents aged 15–19 years in selected affected and at-risk regional areas |
| 2017 | February | Meningococcal ACWY polysaccharide vaccines ceased to be available in Australia |
| | March | WA ceased funding for meningococcal ACWY conjugate vaccine for all children aged 0–4 years and adolescents aged 15–19 years in selected affected and at-risk regional areas |
| | April | Meningococcal B vaccine herd immunity study commenced in SA for grade 10–12 students at participating schools |
| | May | Meningococcal ACWY conjugate vaccine funded by NSW for grade 11–12 students and adolescents aged 15–19 years who no longer attend school<br>Meningococcal ACWY conjugate vaccine funded by Vic for grade 10–12 students and adolescents aged 15–19 years who no longer attend school<br>Meningococcal ACWY conjugate vaccine funded by Qld for grade 10 students and adolescents aged 15–19 years who no longer attend school<br>Meningococcal ACWY conjugate vaccine funded by WA for grade 10–12 students and adolescents aged 15–19 years who no longer attend school |

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| 2017 (cont.) | July | Meningococcal ACWY conjugate vaccine funded by Tas for grade 10–12 students and persons aged 15–19 years who no longer attend school<br>Age for which meningococcal ACWY $CRM_{197}$ conjugate vaccine indication age extended to include use in children aged 2 months to 11 years |
| | September | Meningococcal ACWY conjugate vaccine program funded by NT for at-risk people aged 1–19 years living in specified remote regions, including Nhulunbuy, Alice Springs, Barkly and Katherine, and for residents of institutions |
| | October | Meningococcal ACWY conjugate vaccine funded by SA for all people aged ≥2 months living in selected affected and at-risk regional areas |
| | November | Meningococcal ACWY conjugate vaccine funded by WA for people of all ages in selected affected and at-risk regional areas |
| | | Meningococcal ACWY conjugate vaccine funded by Qld for all Aboriginal and Torres Strait Islander people aged 1–19 years in selected affected and at-risk regional areas |
| | December | Meningococcal ACWY conjugate vaccine funded by Vic for gay and bisexual men and men who have sex with men<br>Qld ceased funding of meningococcal ACWY conjugate vaccine for all Aboriginal and Torres Strait Islander people aged 1–19 years in selected affected and at-risk regional areas<br>Meningococcal ACWY conjugate vaccine program expanded in NT to include all children at 12 months of age<br>WA ceased funding of meningococcal ACWY conjugate vaccine for people of all ages in selected affected and at-risk regional areas |
| 2018 | January | Meningococcal ACWY conjugate vaccine funded by WA for children aged 12 months to 4 years |
| | February | Meningococcal ACWY conjugate vaccine funded by ACT for grade 10 students and adolescents aged 16–19 years who no longer attend school |
| | April | Meningococcal ACWY conjugate vaccine funded by SA for Aboriginal and Torres Strait Islander children and adolescents aged 12 months to 19 years living in the Eyre and Far North and the Flinders and Upper North regions |
| | May | Age for which meningococcal ACWY DT conjugate vaccine registered for use lowered from 2–55 years to 9 months to 55 years |

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| 2018 (cont.) | July | Meningococcal ACWY TT conjugate vaccine funded for all children at 12 months of age, replacing combined Hib (PRP-T) and meningococcal C vaccine<br>Meningococcal ACWY conjugate vaccine recommendations expanded to include:<br>• children aged <2 years<br>• Aboriginal and Torres Strait Islander people aged 2 months to 19 years<br>• adolescents aged 15–19 years<br>• adolescents and young adults aged 20–24 years who live in close quarters<br>• adolescents and young adults aged 20–24 years who are current smokers<br>Doses required vary according to age<br>Meningococcal B vaccine recommendations expanded to include:<br>• Aboriginal and Torres Strait Islander people aged 2 months to 19 years<br>• adolescents and young adults aged 20–24 years who live in close quarters<br>• adolescents and young adults aged 20–24 years who are current smokers<br>Doses required vary according to age<br>Meningococcal ACWY conjugate vaccine funded by Tas all people aged 6 weeks to 21 years |
| | August | Meningococcal ACWY conjugate vaccine program expanded in NT to include all people aged 1–19 years |
| | September | First meningococcal ACWY TT conjugate vaccine indication age extended to include use in individuals aged ≥6 weeks<br>A 2+1 dose schedule for infants aged 2–5 months approved for multicomponent recombinant meningococcal B vaccine<br>SA ceased funding of meningococcal ACWY conjugate vaccine for all people aged ≥2 months living in selected affected and at-risk regional areas |
| | October | SA state-wide Meningococcal B Immunisation Program for children aged 6 weeks to 12 months made available. A catch-up program also made available for those from 12 months to <4 years of age |
| | December | ACT ceased funding of meningococcal ACWY conjugate vaccine for grade 10 students and people aged 16–19 years who no longer attend school<br>Vic ceased funding of meningococcal ACWY conjugate vaccine for adolescents |
| 2019 | January | Meningococcal ACWY conjugate vaccine funded by WA for Aboriginal and Torres Strait Islander children aged 6 weeks to <12 months |
| | February | SA state-wide Meningococcal B Immunisation Program expanded to include grade 10 students<br>SA commenced meningococcal B catch-up program for grade 11 students and those from 17 to <21 years of age<br>Tas ceased funding of meningococcal ACWY conjugate vaccine for all people aged 6 weeks to 21 years |
| | March | Qld ceased funding of meningococcal ACWY conjugate vaccine for adolescents<br>NSW ceased funding of meningococcal ACWY conjugate vaccine for adolescents<br>WA ceased funding of meningococcal ACWY conjugate vaccine for adolescents |

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| 2019 (cont.) | April | Meningococcal ACWY TT conjugate vaccine funded under the NIP for adolescents aged 14–16 years, delivered through a school-based program; and for adolescents aged 15–19 years, delivered through primary care providers as part of an ongoing catch-up program<br>A 2+1 dose schedule for infants aged 2–5 months approved for meningococcal ACWY $CRM_{197}$ conjugate vaccine. This was previously a 3+1 dose schedule |
| | December | SA ceased funding of meningococcal B catch-up program for children aged 12 months to <4 years on 31 December 2019 |
| 2020 | February | SA ceased funding of meningococcal B catch-up program for grade 11 students and those 17 to <21 years of age on 29 February 2020 |
| | July | Meningococcal B and ACWY vaccines funded for people of all ages with asplenia, hyposplenia and complement deficiency and for those undergoing treatment with eculizumab<br>Meningococcal B vaccine funded for all Aboriginal and Torres Strait Islander children aged <12 months as well as Aboriginal and Torres Strait Islander people with HIV or following HSCT. Catch-up available for all Aboriginal and Torres Strait Islander children up to 23 months of age for 3 years, until 30 June 2023 |
| | October | Second meningococcal ACWY TT conjugate vaccine registered for use in people aged 12 months and above |
| 2022 | September | Quadrivalent meningococcal diphtheria toxoid conjugate vaccine (Menactra) no longer available and replaced by another quadrivalent meningococcal tetanus toxoid conjugate vaccine (MenQuadfi) |
| | December | A single booster dose of meningococcal B vaccine recommended for individuals with medical conditions associated with increased risk of invasive meningococcal disease (refer to the *Australian Immunisation Handbook*) |
| 2023 | July | Catch-up program of meningococcal B vaccine (Bexsero) available for all Aboriginal and Torres Strait Islander infants aged <2 years (originally due to end on 30 June 2023) |
| 2024 | March | Qld provided free meningococcal B vaccine for eligible infants, children and adolescents in addition to NIP-eligible groups, including:<br>• all infants and children aged <2 years<br>• all adolescents aged 15–19 years |
| | December | Meningococcal B vaccine (Trumenba) no longer available in Australia |
| 2025 | January | NT commenced free meningococcal B vaccine program for:<br>• infants aged 6 weeks–12 months and year 9 students from January 2025<br>• children aged 12 months–2 years and adolescents aged 15–19 years as part of a 2-year catch-up program until 31 December 2026 |
| | February | Qld expanded the free meningococcal B vaccine program, including:<br>• for infants, aged 6 weeks–<12 months<br>• catch-up immunisation for children aged 12 months–<2 years who have not yet started or completed a course of meningococcal B immunisation with the Bexsero vaccine<br>• for adolescents aged 15–<20 years |
| | October | Meningococcal C vaccine (Neis-Vac) no longer available in Australia |

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| 2026 | April | MenQuadfi indicated age extended to include use in children aged ≥6 weeks |
| | May | Vic announced meningococcal B program for grade 10 students from 1 January 2027 |
| | July | Tas commenced meningococcal B program for infants from 6 weeks of age up to 2 years and catch-up vaccination for children born on or after 1 July 2025 |