Dear Parents, Guardians and Students,

One type of meningitis is caused by a bacterium called *Neisseria meningitidis.* Infections caused by this bacterium are serious, and may lead to death. Symptoms of an infection with *Neisseria meningitidis* may include a high fever, headache, stiff neck, nausea, confusion and a rash. This disease can become severe very quickly and often leads to deafness, mental retardation, loss of arms or legs and even death. The bacteria are spread from close person to person contact through the exchange of nose and throat secretions, by activities such as kissing or sharing eating or drinking utensils. The bacteria are not spread by casual contact or by simply breathing the air where a person with meningitis has been.

There are 2 types of meningococcal vaccine available in the United States. Vaccines for meningococcal serogroups A, C, W and Y are composed of polysaccharide (sugar molecules) from the surface of the meningococcal bacteria. Meningococcal vaccines in which the polysaccharide is chemically bonded ("conjugated") to a protein produce better protection and are more effective in young children than the original polysaccharide vaccine. Vaccines for meningococcal serogroup B (MenB) are composed of proteins also found in the surface of the bacteria. Neither type of vaccine contains live meningococcal bacteria. Meningococcal polysaccharide or conjugate vaccines provide no protection against serogroup B disease and MenB vaccines provide no protection against serogroup A, C, W or Y disease. For protection against all 5 serogroups of meningococcus it is necessary to receive both vaccines.

The United States Centers for Disease Control and Prevention (CDC) recommends vaccination of children with the meningococcal conjugate vaccine (Menactra and Menveo) at 11 or 12 years of age, with a booster dose of the vaccine at 16 years of age. The booster dose at age 16 provides ongoing protection from the disease after high school. The CDC also recommends that a MenB vaccine series may be administered to persons 16 through 23 years of age with a preferred age of vaccination of 16 through 18 years. This permissive (Category B) recommendation allows the clinician to make a MenB vaccine recommendation based on the risk and benefit for the individual patient.

The state of Indiana requires all students in grades 6-12 to have the appropriate number of meningococcal conjugate vaccine doses. One dose of meningococcal conjugate vaccine is required for all students in 6^{th} -11^{th} grade. A second booster dose is required for students entering 12^{th} grade. These vaccines are a legal requirement for school entry (Indiana Administrative Code 410 IAC 1-1-1) for the 2016-2017 school year. The MenB vaccine not a legal requirement for school entry at this time, and cannot be used for the meningococcal vaccine requirement for school entry.

All students in grades 6-12 must have acceptable documentation of required immunizations on record at the school they are currently attending. An acceptable record includes a signed record from the child's health care provider indicating the name of the vaccine given and the date it was given, a record of the immunization in the state immunization registry (CHIRP) prior to the start of the school year, or a record from another school showing the required immunizations have been given.

Many local health departments and private healthcare providers offer this vaccine. Please contact your health care provider for specific instructions regarding your child.

More information about meningococcal disease can be found at:

The Centers for Disease Control and Prevention (CDC) website:
http://www.cdc.gov/vaccines/vpd-vac/mening/default.htm

IN State Department of Health website:
http://www.in.gov/isdh/25455.htm

Indiana State Department of Health
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Michael R. Pence
Governor

Jerome M. Adams, MD, MPH
State Health Commissioner

Dear Parent or Guardian:

Indiana Code 20-34-4-3 requires the Indiana State Department of Health to provide information on the link between cancer and the human papillomavirus (HPV) and the vaccination that can protect your child from HPV related cancers later in life. Each year, HPV causes more than 26,000 new cases of cancer in both men and women. HPV is the most common sexually transmitted infection and is spread by skin-to-skin sexual contact. The Centers for Disease Control and Prevention (CDC) has stated that based on recent studies, HPV is so common that nearly all sexually active people will get it during their life-time.[1] Most HPV infections cause no symptoms and go away on their own. However, infection with the virus can lead to cervical cancer in women. It can also cause other oral and genital cancers in men and women. HPV also causes genital warts.

Vaccination is the best way to prevent HPV infection and associated cancers that present later in life. According to the Centers for Disease Control and Prevention, American Academy of Pediatrics, American Academy of Family Physicians and the American College of Physicians, all boys and girls ages 11 or 12 years should get vaccinated.[2] [3]By vaccinating at this age, preteens will be protected before any exposure to the virus occurs. We also know the vaccine produces a better immune response at this age. There are two vaccines available to protect against HPV infection. The HPV vaccines are given in three doses over six months. It is important to get all three shots. The HPV vaccine is safe to give at the same time as other recommended vaccines. Older teens and young adults can receive the vaccine through age 26.

Both vaccines offer protection against HPV types 16 & 18. The vaccine is 93% effective in preventing precancers of the cervix caused by these types of HPV. One of the vaccines also offers protection from genital warts, and five additional high-cancer-risk strains: 31, 33, 45, 52, and 58. The vaccines offer long-lasting protection from HPV. Current studies show that HPV protection from the vaccine lasts at least eight years. There is no evidence of waning protection after that time. These vaccines have also been studied very carefully for safety. Serious side effects are very rare. Preteens and teens should always sit or lie down for about 15 minutes after receiving any vaccines to prevent fainting.

The vaccine does not protect against all types of HPV known to cause cervical cancer. It is important that women continue to receive routine cervical cancer screenings (pap test). It is also important to follow-up on all abnormal results. The Pap test can find abnormal cells on the cervix, so that they can be removed before cancer develops. There are no tests currently available to find HPV in other parts of the body.

Please contact your healthcare provider if you have questions about the HPV vaccine. Questions may be directed to the Indiana State Department of Health Immunization Program at (800)701-0704.
For more information on HPV and the vaccine, please visit:
Centers for Disease Control & Prevention (CDC) HPV website: http://www.cdc.gov/std/hpv/default.htm
CDC HPV Vaccine Website: http://www.cdc.gov/vaccines/vpd-vac/hpv/
Immunization Action Coalition (IAC) HPV Website: http://www.vaccineinformation.org/hpv/

Yours in Health,
The Indiana State Department of Health Immunization Division

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[1] http://www.cdc.gov/hpv/whatishpv.html
[2] http://www.cdc.gov/std/HPV/STDFact-HPV.htm
[3] https://www2.aap.org/immunization/illnesses/hpv/hpv.html