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May 18, 2015

Ms. Tina Shockley, Education Associate  
Department of Education  
401 Federal Street, Suite 2  
Dover, DE 19901

RE: 18 DE Reg 832 [DOE Proposed Vaccination Regulation]

Dear Ms. Shockley:

The State Council for Persons with Disabilities (SCPD) has reviewed the Department of Education's (DOE's) proposal to amend its standards for vaccinations of public school students. Background is compiled in the attached February 27, 2015 News Journal article. The proposed regulation was published as 18 DE Reg. 832 in the May 1, 2015 issue of the Register of Regulations. SCPD has the following observations.

In a nutshell, medical experts are recommending that entering ninth graders be required to receive a tetanus, diphtheria, and pertussis (Tdap) booster shot and meningococcal vaccine for high school entry. Delaware is one of only four states which do not require the above immunizations.

The proposed regulation (§3.1) would add the above requirement for entering ninth grade students in school year 2016-17. Compliance would be "strongly recommended, but not required" for entering ninth grade students in school year 2015-16. Schools would be required to coordinate with the Division of Public Health (DPH) if there are students who have not received the immunizations (§3.2). Exemptions for religious and medical reasons can be granted by the Division of Public Health (§6.1.1).

SCPD endorses the concept underlying this initiative subject to the following observations and recommendations.

First, in §2.1.1, first sentence, the term "or other" should be reviewed. The superseded version referred to "other approved vaccine". A simple reference to "or other" makes little sense. Moreover, there is some "tension" between allowing "other" vaccines in §2.1.1 and omitting "other" vaccines in §3.1.1.

Second, in §1.0, the definition of “school enterer” includes students being admitted to any public school. In contrast, §4.4 only refers to “school districts” which would exclude charter schools.

Third, the attached article recommends a meningococcal vaccine at ages 11-12 with a booster at ages 16-18. The regulation (§3.1.2) contemplates a single vaccine for entering ninth graders with no booster. In other contexts (e.g. §2.1.4.1), the regulation does address immunization of chronologically “older” students. The DOE may wish to consult the DPH in this context. Even if a booster were only “recommended”, the regulation addresses “recommended” immunization in §3.1.

Fourth, the DOE and/or DPH may wish to consult with DMMA to ensure that the listed immunizations and schedules are covered by Medicaid.

Thank you for your consideration and please contact SCPD if you have any questions or comments regarding our position, observations or recommendations on the proposed regulation.

Sincerely,



Daniese McMullin-Powell, Chairperson  
State Council for Persons with Disabilities

- cc: The Honorable Mark Murphy, Secretary of Education  
Mr. Chris Kenton, Professional Standards Board  
Dr. Karyl Rattay, Division of Public Health  
Ms. Deborah Harvey, Division of Public Health  
Dr. Teri Quinn Gray, State Board of Education  
Ms. Mary Ann Mieczkowski, Department of Education  
Ms. Kathleen Geiszler, Esq., Department of Justice  
Ms. Terry Hickey, Esq., Department of Justice  
Ms. Ilona Kirshon, Esq., Department of Justice  
Mr. Brian Hartman, Esq.  
Developmental Disabilities Council  
Governor’s Advisory Council for Exceptional Citizens

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## Delaware may mandate vaccines for ninth-graders

Jonathan Starkey, The News Journal 11:18 p.m. EST February 27, 2015



(Photo: GARY EMEIGH/THE NEWS JOURNAL)

Delaware state officials are considering new vaccination mandates that would require students to receive shots before entering their freshman year of high school.

Rita Landgraf, Delaware's health secretary, said this week her department is exploring whether to require vaccinations before ninth grade to help prevent the spread of pertussis (whooping cough) and meningitis.

Dr. Karyl Rattay, director of the Delaware Division of Public Health, said in a statement she's been "gathering information and working with partners to assess the pros and cons of mandating vaccinations for adolescents."

Delaware regulations require students entering the state's public school system to receive a suite of immunizations, including shots that protect against diphtheria, tetanus and pertussis; polio; and measles, mumps and rubella.

The new mandates would add immunization requirements for students entering ninth grade.

In a Feb. 19 paper, two Nemours doctors said Delaware should require a tetanus, diphtheria and pertussis, or Tdap, booster shot and the meningococcal vaccine for high school entry to "prevent serious disease."

Nemours operates the Alfred I. du Pont Hospital for Children in Rockland.

Delaware is one of just four states that doesn't require the Tdap booster shot before high school, the report said. The state requires the meningitis vaccine before college, but not for adolescents.

Delaware's vaccination rates are above the national average ([/story/news/health/2015/02/06/delaware-vaccination-rates-higher/23011339/](#)), but the new requirements would further boost community rates of vaccination and prevent the spread of disease, said Dr. Krishna White, chief of Nemours' division of adolescent medicine.

"The diseases these vaccines prevent against are serious life-threatening illnesses," White said.

Delaware already requires, starting in the 2013-2014 school year, health appraisals for incoming ninth-graders. Requiring vaccines that are currently only recommended could be a next step.

The timing of requiring new high school students to receive vaccinations has additional benefits, says Brian McDonough, chairman of the family medicine department at Saint Francis Healthcare.

"They're about to begin high school," McDonough said. "You can talk to them about all kinds of other issues: cigarettes, drugs, sports physicals, sexuality. It's a real important time."

Landgraf, a Cabinet secretary to Gov. Jack Markell, said her office is working with education officials to determine ways students could access the vaccines. It's a careful balance, Landgraf said, to ensure that students don't drop out of school because they do not have required shots.

"We don't want the unintended consequence of students then not being able to get an education," Landgraf said.

Contact Jonathan Starkey at (302) 98-6756, on Twitter @jwstarkey or at [jstarkey@delawareonline.com](mailto:jstarkey@delawareonline.com).

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Article Link: <http://www.webmd.com/children/vaccines/meningococcal-vaccine>

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## Meningococcal Vaccine

### In this article

How Is Meningococcal Disease Spread and Who Is Most at Risk?

Can the Meningococcal Vaccine Cause Meningococcal Disease?

Are Both Meningococcal Vaccines Equally Effective?

Is It Possible to Get the Vaccine and Still Get Meningitis?

Who Should Get Which Meningococcal Vaccine and When?

What Are the Side Effects From the Meningococcal Vaccines?

What Are the Risks of GBS With the MCV4 Vaccine?

Meningococcal disease is an infection caused by a strain of bacteria called *Neisseria meningitidis*. This nasty bug is one of the leading causes of bacterial meningitis in children aged 2 to 18 in the U.S.

Meningococcal disease can include meningitis -- a serious, potentially life-threatening inflammation of the membranes covering the brain and spinal cord -- and a life-threatening blood infection. Meningococcal disease can cause limb loss through amputation, hearing loss, problems with the nervous system, mental retardation, seizures, and strokes.

Fortunately, meningococcal disease is preventable, and the key to prevention is the meningococcal vaccine. Here is information about the vaccine that you can use to help protect yourself and your family from meningococcal disease.

### How Is Meningococcal Disease Spread and Who Is Most at Risk?

Meningococcal disease is not as contagious as other illnesses, such as a cold or the flu. But it is spread by contact with infected respiratory and throat secretions. That can happen with coughing, kissing, or sneezing.

Because the risk increases with close or prolonged contact with an infected person, family members in the same household and caregivers are at an increased risk. For the same reason, so are college students who live in dormitories.

## Can the Meningococcal Vaccine Cause Meningococcal Disease?

The short answer is no. There are actually two meningococcal vaccines licensed in the U.S. Neither of the vaccines contains live bacteria.

The vaccines contain antigens -- substances that trigger the body's immune system and cause it to make antibodies. These antibodies then protect the body by attacking and killing the bacteria if it should invade.

The first vaccine -- meningococcal polysaccharide vaccine or MPSV4 -- was approved in 1978. It's made with the antigens contained in the outer polysaccharide or sugar capsule that surrounds the bacterium.

The newer vaccine, approved in 2005, is the meningococcal conjugate vaccine or MCV4. It uses antigens taken from the polysaccharide capsule and then bound to a separate protein that targets the body's immune cells. This makes it easier for the body's immune system to see and recognize the antigens.

One type of MCV4, Menveo, is licensed for use in people aged 2 to 55. Another version, Menactra, is approved for those 9 months to 55 years old. MPSV4 is the only vaccine licensed for use in people over 55 as well as people 2 to 55. Both vaccines protect against four types of meningococcal disease.

## Are Both Meningococcal Vaccines Equally Effective?

Both MCV4 and MPSV4 are about 90% effective in preventing meningococcal disease. There are actually several types of *N meningitidis* -- the bacterium that causes meningococcal disease. Both vaccines protect against four of those types, including two types that are the most common in the U.S.

MCV4 has not been available long enough to compare the long-term effectiveness of the two vaccines. But most experts think that MCV4 provides better, longer-lasting protection.


## Is It Possible to Get the Vaccine and Still Get Meningitis?

Because the vaccines do not protect against all causes of meningitis, it is still possible that someone could receive the vaccine and still get meningitis. But the risk of contracting meningococcal meningitis is significantly lower after the vaccine.

Vaccines like the Hib vaccine and the pneumococcal vaccine are very effective at protecting against other causes of meningitis and should be included as part of a routine childhood vaccination schedule. Check with your doctor and your children's doctor to make sure that you and your family are protected against meningitis, as well as other serious illnesses.

## Who Should Get Which Meningococcal Vaccine and When?

Although MCV4 is the preferred vaccine for most people, if it is not available when it's time for the vaccination, MPSV4 can be used.

 Routine immunization with the meningococcal vaccine MCV4 is recommended for children aged 11 or 12, with a booster to be given between ages 16 and 18. It is also recommended for the following groups:

- College freshmen living in a dorm
- Military recruits
- Someone who has a damaged spleen
- Someone whose spleen has been removed
- Someone with terminal complement component deficiency (an immune system problem)
- Microbiologists who are routinely exposed to *meningococcal bacteria*
- Someone traveling to or residing in a country where the disease is common
- Someone who has been exposed to meningitis

Preteens who are 11 and 12 usually have the shot at their 11- or 12-year-old checkup. An appointment should be made to get the shot for teenagers who did not have it when they were 11 or 12.

The vaccine may be given to pregnant women. However, since MCV4 is a newer vaccine, there is limited data about its effect on pregnant women. It should only be used if clearly needed.

Anyone who is allergic to any component used in the vaccine should not get the vaccine. It's important to tell your doctor about all your allergies.

People with mild illness can usually get the vaccine. But people who are moderately or severely ill when it's time for the vaccine should wait until they recover.

Anyone with a history of Guillain-Barre syndrome should discuss it with their doctor before getting a vaccination.

## What Are the Side Effects From the Meningococcal Vaccines?

With any vaccine, there is the potential of a severe allergic reaction within a few minutes to a few hours after the shot. But the likelihood that the meningococcal vaccines would cause a severe reaction is extremely slight.

About one out of every two people who get the shot experience mild reactions such as redness or a mild pain where the shot was given. Those usually go away in one to two days. A small percentage of people develop a mild fever.

There have been reports that a few people have been diagnosed with Guillain-Barre syndrome (GBS) after receiving MCV4. But experts say it occurs so rarely that it's not possible to tell if it's related to the vaccine.

## What Are the Risks of GBS With the MCV4 Vaccine?

Since 2005, more than 15 million doses of MCV4 have been distributed. It's uncertain how many of those have actually been given. In that same time period, there have been 26 confirmed cases of GBS, a serious nervous system disorder, reported within six weeks of the vaccine being taken. There is not enough data at this time to tell whether or not the vaccine was a factor. But analysis of the data suggests that the incidence of GBS is no higher for people receiving the vaccine than the incidence of GBS in the general population.

Still, the timing of the onset of symptoms has raised concern. The CDC is continuing to study the issue and has recommended that people be told about the study when they are considering the vaccine. The current opinion is that even if there is a slight increase in the risk of GBS, it's significantly outweighed by the risk of meningococcal disease without the vaccine.

WebMD Medical Reference

SOURCES:

*Pediatrics*, published online Feb. 1, 2011. CDC web site: "Meningitis Questions & Answers," "Meningococcal Vaccines: What You Need to Know," "Meningococcal Vaccination," "Vaccines and Preventable Diseases: Meningococcal: Who Needs to Be Vaccinated?" "Meningococcal vaccine side-effects," "GBS and Menactra Meningococcal Vaccine."

VaccineInformation.org: "Meningococcal Disease Vaccine."

Reviewed by David T. Derrer, MD on August 17, 2014

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### Further Reading:

- [What is meningitis?](#)
- [Meningococcal Vaccines: What You Need to Know](#)
- [Meningococcal Meningitis](#)
- [Prevent Meningitis: Tips to Protect Your Teen](#)
- [The Meningitis Vaccines: What Parents Should Know](#)
- [Adult Meningitis Vaccine: Benefits, Risks, Side Effects, and More](#)
- [Adult Meningococcal Vaccine: Guidelines, Side Effects, Benefits](#)
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