



Meningococcal Disease Fact Sheet

What is meningococcal disease?

Meningococcal disease is a bacterial infection caused by *Neisseria meningitidis*. When this bacterium affects the lining of the brain and spinal cord (the meninges), the condition is called meningococcal meningitis. It is a relatively rare disease and usually occurs as a single event. Meningococcal disease can be rapidly progressive. With early diagnosis and treatment, the likelihood of full recovery is increased. Early recognition and prompt initiation of antimicrobial therapy is crucial, as these infections may lead to death.

Who gets meningococcal disease?

Anyone can get meningococcal disease, but it is more common in infants and children.

What are the symptoms of meningococcal disease?

The symptoms may include any of the following: fever, severe sudden headache, nausea, vomiting, stiff neck, pain in the shoulders and back, and a red pinpoint rash. High fever and irritability are signs in a very young child. When the bacteria are in the blood (meningococemia), then a purplish skin rash that looks like bruising may occur. When the bacteria are in the spinal fluid, severe neck stiffness and meningitis may occur.

How soon do symptoms appear?

The symptoms may appear 1 to 10 days after exposure, but usually within 3 to 4 days.

How is meningococcal disease spread?

The meningococci bacteria are spread by direct close contact with nose and throat discharges of an infected person. People may carry the bacteria in their noses and throats without becoming ill, these persons are known as healthy carriers. Healthy carriers are able to spread the bacteria to other people, who may develop meningococcal disease with serious symptoms.

When and for how long is a case infectious to other people?

A person may pass the bacteria from the time he/she is first infected and until the bacteria are no longer present in discharges from the nose and throat. Persons are usually no longer infectious after 24 hours of effective antibiotic treatment.

How can you reduce the risk of contracting meningococcal disease?

Everyone should be sensitive to public health measures that decrease exposure to oral secretions, such as covering one's mouth when coughing or sneezing and washing hands after contact with oral secretions. A healthy lifestyle that maximizes your body's own immune

system response, through balanced diet, adequate sleep, appropriate exercise, and avoidance of excessive stress, is very important.

Presently there is a vaccine that will protect against four of the five main strains of meningococcal bacteria that cause almost all invasive or severe disease. The use of the vaccine is recommended in outbreak situations, for individuals with specific medical conditions, or for those traveling to areas where the illness is clearly in excess of normal expectancy.

The American College Health Association recommends immunization of college students. It is important to note that meningococcal vaccine should not be used in place of preventive treatment for those exposed to a meningococcal disease. The protection from immunization is too slowly generated in this situation.

What should you do if you suspect meningococcal disease?

Individuals who experience any of the symptoms described above should consult their health care provider immediately.

What should I do if I have been in contact with a diagnosed case of meningococcal disease?

The use of preventive antibiotics (such as rifampin or ciprofloxacin) is recommended for **close contacts** exposed to a person diagnosed with meningococcal disease. Anyone who suspects possible exposure should consult a health care provider immediately. Beginning preventive treatment more than 2 weeks after exposure to the case would be too late to prevent disease.

Who is considered a close contact?

Close contacts are those who are likely to have been exposed to the nose and throat secretions of the sick person. Close contacts include, but are not limited to the following:

- Those living in the same house as the ill person
- Those sharing sleeping arrangements with the ill person
- Children sharing toys, such as in the same child care or nursery school, as the ill person
- Those who shared cigarettes, food, drinks, or other things that contain saliva with the ill person
- Those who have kissed the ill person
- Those who have given mouth-to-mouth resuscitation to, intubated, or suctioned the nasopharyngeal secretions of the ill person

Casual contact, such as being in the same classroom, workplace, or sitting at the same table with an infected person is not usually considered “close contact.”

What is the treatment for this disease?

Certain antibiotics are very effective in the treatment of the disease and are available from your health care provider. Generally, penicillin is the drug of choice for meningococcal infections.