



What is meningococcal infection?

- Meningococcal infection is a serious illness caused by a bacterium known as meningococcus.
- Meningococci are bacteria found naturally at the back of the throat or nose in about 10% of the population.
- Many adults and children carry these germs without ill effects.
- Many of the meningococci seem to be harmless and may prevent more dangerous meningococci getting into the body.
- Only rarely do meningococci overcome the body's defences and cause illness.
- When this does occur, the bacteria cause meningitis (infection and inflammation of the lining of the brain) and a severe condition that can spread throughout the body in the blood called septicaemia (blood poisoning).

How do we pick up the bacteria?

- It is not known why some people become ill while others remain symptomless 'carriers' of the bacteria.
- Infection can occur at any age. However, most cases occur in children under four. The next highest incidence is recorded for teenagers between 15 and 19 years of age.
- Most cases occur without any connection to other cases (sporadic cases), sometimes two or more cases are connected by those affected having close contact (outbreaks).

If the bacteria are so common, why do so few of us develop the illness?

- Even though we come into contact with the meningococcus regularly, our bodies are able to fight off the infection. A tiny number of people who pick up the bacteria develop meningitis or it may invade their blood stream (septicaemia) or both within 2-12 days of doing so. We do not yet fully understand why the bacteria cause such severe illness in these people. It may be due to weakness in their body defence systems.

- It is rare for two or more cases to occur together. The majority occur as single cases, with no increased risk to others, e.g. in the school or workplace.

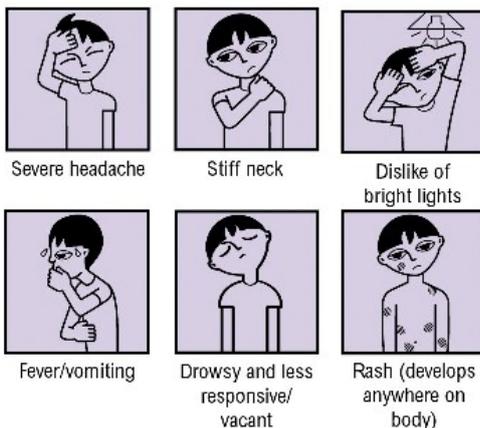
What precautions are taken if there is a case?

- The risk to contacts is generally low but increases in people who live in the same household as a case of meningococcal disease. For this reason an antibiotic is offered to such contacts. The antibiotic is given to kill the meningococci that they may be carrying in their nose or throat, and so reduce the risk of infection to others. These close contacts may still develop the disease despite taking the antibiotics and should be aware of the signs and symptoms as below.
- Other contacts are not usually offered an antibiotic as their risk is far lower and because the antibiotic can also destroy organisms that live in the nose and throat that may give protection against the disease.
- Occasionally, where there are two or more cases (this is called a cluster) with the same strain of meningococcal disease in a defined population such as a school, college or university antibiotics and vaccination may be offered to the whole school or college or halls of residence.
- Vaccines are available against some strains of the meningococcus (groups A, B, C, W135 and Y). They are also given to the household and very close contacts if the patient is confirmed to have a specific vaccine preventable strain i.e. A, B, C, W135 or Y meningococcal infection.

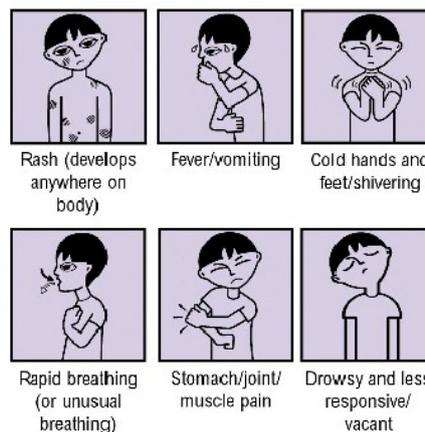
Signs and symptoms of meningococcal infection:

Someone with the infection will become very ill, though not all the symptoms will occur at once.

What to watch out for Meningitis



Septicaemia (germ has invaded blood stream)



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Not all of these symptoms may be present or show at once

Fever • severe headaches • vomiting • drowsiness or altered consciousness • dislike of bright lights • neck stiffness • rash of small red-purple spots or bruises anywhere on the body.

The rash may not fade when pressed firmly using a glass. If such a non-fading rash is present, the disease is in an advanced stage and urgent treatment should be sought.



In babies watch for the following & remember these may not all be present

Fever ▪ refusing feeds or vomiting ▪ arching of the head and back ▪ bulging of the soft spot on the head ▪ blank and staring expression ▪ abnormally drowsy ▪ agitated and fretful ▪ turning away from light ▪ shrill moaning cry especially when handled ▪ a rash as above

How soon can a child be back at school after meningococcal infection?

- Once a child has recovered from meningococcal infection and has been treated to clear the infection, they can return to school.
- There is no reason to exclude any siblings or other close contacts of the case from school.

Find out more

MeningitisNow information about meningitis and the work of the meningitis trust
www.meningitisnow.org Freephone **0808 80 10 388 (24hr nurse-staffed helpline)**

The Meningitis Research Foundation www.meningitis.org **0808 800 3344**

NHS choices – Meningitis
www.nhs.uk/conditions/Meningitis/Pages/Introduction.aspx
