

Meningococcal Disease

Bacterial Meningitis and Bacteremia



What is meningococcal disease?

Meningococcal disease is a sudden illness caused by a bacterium called *Neisseria meningitidis*. This bacterium infects the bloodstream (meningococcemia) or the meninges, a thin lining covering the brain and spinal cord (meningococcal meningitis).

Where does it come from?

N. meningitidis is carried in the nose and throat of many healthy adults and children. Though these individuals may not exhibit symptoms or illness, they can spread the infection to others.

How is it spread?

This organism is spread by direct contact with nasal or throat secretions of a carrier or ill person. Transmission can occur by sharing saliva via eating utensils, glassware, cigarettes, toothbrushes or kisses, and when people sleep near each other or share a household.

What are the symptoms?

Although most people exposed to the meningococcal bacteria do not become ill, others can develop fever, cough, runny nose, intense headache, stiff neck, and unusual skin lesions. There may be a fine spotty pink rash that progresses to dark patches. Some people develop infections of the blood or brain, which can be fatal. Even with treatment, about 10 percent of severe cases are fatal. Up to 25 percent of patients who recover have chronic damage to the nervous system.

How soon do symptoms appear?

Symptoms appear two to ten days after exposure.

How long is an infected person contagious?

A person can transmit the disease from the time they are first infected until bacteria are no longer present in discharges from the nose and throat. The contagious period varies according to treatment. A person can be contagious even without any symptoms.

Who is at risk for illness?

Anyone can get meningococcal disease, but it is more common in children under 2 years of age. College freshmen and military recruits living in congregate settings also have a higher rate of meningococcal disease.

What is the treatment?

Meningococcal disease is treated with injected or intravenous antibiotics. Oral antibiotics like rifampin are given to reduce the number of meningococcal bacteria in the nose and throat. These antibiotics are also given to close contacts of persons with meningococcal disease.

Who should be treated

People who may have had close contact with an infected person should contact their primary health care provider about treatment with antibiotics. Close contacts can include household members, intimate contacts, health care personnel performing mouth-to-mouth resuscitation, and day care center playmates. Casual contacts such as classmates or co-workers usually do not require treatment unless they shared beverage containers, cigarettes, kisses, or objects entering the mouth.

Is there a vaccine available?

There are two vaccines, MPSV4 and MCV4 that protect against two of the three types of *N. meningitidis* most common in the United States. MCV4 is the preferred vaccine for people 2 through 55 years of age. MPSV4 may be used if MCV4 is not available, and is the only meningococcal vaccine licensed for people older than 55. MPSV4 will protect against some strains of *N. meningitidis*, but it is only recommended in outbreaks or for travel to areas of the world with high rates of the disease. The exact length of protection is not known, but appears to be about three years in persons 4 years of age or older. The vaccine provides contacts with protection against meningococcal disease, but does not eliminate the bacteria from the throat. Immunized persons can still potentially transmit the disease to others. Vaccination is recommended for children and adolescents 11 - 18 years of age, for college freshmen and military recruits living in congregate settings, for those traveling to parts of Africa where meningococcal disease is common and for those who do not have a spleen or who have complement deficiencies, such as systemic lupus erythematosus (SLE).

How common is meningococcal disease in Washington?

Each year 30 to 60 cases are reported, including 1 to 8 deaths

What should I do if I suspect someone in my family has meningococcal disease?

If you or anyone in your family exhibits severe symptoms of meningococcal disease, contact your primary health care provider immediately.

For more information:

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