Frequently Asked Questions

MENINGOCOCCAL DISEASE (Neisseria meningitidis)

What is MENINGOCOCCAL DISEASE?

Meningococcal disease is a severe infection caused by the bacteria, *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. This type of meningitis requires prompt public health intervention to prevent spread to others. The Meningococcal vaccine (MCV) is available for outbreak control and for prevention among high-risk groups.

Who gets meningococcal disease?

Anyone can get meningococcal disease, but it is more common in infants and children. Rates of disease decrease after infancy and then increase in adolescence and young adulthood. Risk factors include crowding, low socioeconomic status, active or passive exposure to tobacco smoke and current upper respiratory tract infections. New military recruits and university students living in dormitories have also been found to have an increased risk.

What are the symptoms of meningococcal disease?

The symptoms 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. If the bacteria get into the blood, a purplish skin rash that looks like bruising may occur.

How soon do symptoms appear?

The symptoms may appear 2-10 days after exposure, but usually within 3-4 days.

How is meningococcal disease spread?

The meningococcal bacteria are spread by direct close contact with nose and throat discharges of an infected person. For example, the disease can be spread when an infected person coughs or sneezes and another person inhales the contaminated droplets. People can carry the bacteria in their nose and throat without becoming ill; they are 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.

What should you do if you suspect meningococcal disease?

Individuals experiencing symptoms described above should consult their physician immediately. Meningococcal disease can be rapidly progressive. Early recognition and prompt initiation of antibiotics are crucial.

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. Public health officials, in collaboration with the health care provider, identify and determine what contacts should be treated. Close contacts generally consist of household members, intimate contacts, health care personnel, daycare center playmates, etc. Casual contact, as might occur in a regular classroom or office setting, is not usually significant enough to cause concern.

What is the treatment for this disease?

Antibiotics, such as penicillin or ceftriaxone, can be used to treat people with meningococcal disease.

24/7 Emergency Contact Number: 1-888-295-5156

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