



MENINGOCOCCAL DISEASE (*Neisseria meningitidis*)

What is meningococcal disease?

Meningococcal disease is an often severe and potentially deadly 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 can also infect the bloodstream. Meningococcal disease is a relatively rare disease and usually occurs as a single event.

Who gets meningococcal disease?

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

How is meningococcal disease spread?

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

What are the symptoms of meningococcal disease?

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 condition is meningococemia, a purplish skin rash that looks like bruising may occur.

Individuals who experience any of these symptoms should consult their physician immediately. Meningococcal disease can progress rapidly, so early recognition is crucial. Early diagnosis and treatment with antimicrobial therapy increases the likelihood of full recovery.

How soon do symptoms appear?

Symptoms may appear one to 10 days after exposure, usually within three to four days. An individual may pass the bacteria from the time he/she is first infected until the bacteria are no longer present in discharges from the nose and throat. Individuals are usually no longer infectious after 24 hours of effective antibiotic treatment.

Should an infected person be excluded from work or school?

Yes, an infected person should be excluded from work or school for 24 hours after the initiation of treatment and remain under respiratory isolation for that time period. High risk contacts including household contacts, childcare or preschool age contacts, and persons exposed to the patient's secretions at any time during seven days before onset of illness, may receive preventative treatment but do not need to be excluded from work



Frequently Asked Questions

or school unless advised to do so by the Delaware Division of Public Health (DPH). If they show symptoms of meningococcal disease, they should be excluded from work or school and consult a health care provider immediately.

What is the treatment for meningococcal disease?

Antibiotic treatment is available to treat meningococcal disease, such as Rifampin or Ciprofloxacin. The use of preventive treatment (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 physician immediately. Beginning preventive treatment more than two weeks after exposure to the case would be too late to prevent secondary cases.

Certain antibiotics are very effective in the treatment of the disease and are available from health care providers. Generally, penicillin is the drug of choice for meningococcal infections. For more information, contact your health care provider or DPH's Office of Infectious Disease Epidemiology.

How can a person or community prevent the spread of meningococcal disease?

There are two types of meningococcal vaccines: meningococcal conjugate (MenACWY) vaccines and serogroup B meningococcal (MenB) vaccines. These vaccines help protect against all three serogroups (B, C, and Y) of *Neisseria meningitidis* bacteria most commonly seen in the United States. Close contacts of a person with meningococcal disease should receive antibiotics to prevent them from getting sick.

Resources

Centers for Disease Control and Prevention,
<https://www.cdc.gov/meningococcal/index.html>

Heyman, D. (2015) Control of Communicable Disease Manual (20th edition).