



**Louisiana Office of Public Health
Infectious Disease Epidemiology
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Information on Meningococcal Meningitis Public Information

What is meningitis?

Meningitis is an infection of the fluid of a person's spinal cord and the fluid that surrounds the brain. People sometimes refer to it as spinal meningitis. Meningococcal meningitis is caused by a bacteria called meningococcus.

What are the signs and symptoms of meningitis?

Common symptoms of meningitis in anyone over the age of 2 years are

- High fever,
- headache,
- stiff neck

These symptoms can develop over several hours, or they may take 1 to 2 days.

Other symptoms may include

- nausea, vomiting,
- discomfort looking into bright lights,
- confusion,
- sleepiness.

In newborns and small infants, the classic symptoms of fever, headache, and neck stiffness may be absent or difficult to detect, and the infant

- may only appear slow or inactive,
- be irritable,
- have vomiting,
- be feeding poorly.

As the disease progresses, patients of any age may have seizures.

How is meningitis diagnosed?

Early diagnosis and treatment are very important. If symptoms occur, the patient should see a doctor immediately. The diagnosis is usually made by growing bacteria from a sample of spinal fluid. The spinal fluid is obtained by performing a spinal tap, in which a needle is inserted into an area in the lower back where fluid in the spinal canal is readily accessible. Identification of the type of bacteria responsible is important for selection of correct antibiotics.

Can meningitis be treated?

Bacterial meningitis can be treated with a number of effective antibiotics. It is important, however, that treatment be started early in the course of the disease. Appropriate antibiotic treatment of most common types of bacterial meningitis should reduce the risk of dying from meningitis to below 15%, although the risk is higher among the elderly.

Is meningitis contagious?

The meningococci that cause the disease are spread by large droplets coming from respiratory and throat secretions. These large droplets are heavy and fall rapidly to the ground. So **this disease is NOT very contagious.**

Those who may be infected are

- household contacts, roommates,
- people who had close contacts with the mouth secretions of the patient (kissing for example),
- day care center contacts.

People with casual contact with a patient (working together, attending primary school, talking) are not considered to be at risk of infection.

Only the close contacts need a preventive treatment

People who qualify as close contacts of a person with meningitis caused by *N. meningitidis* should receive antibiotics to prevent them from getting the disease.

Your doctor or the health department will discuss with you the need for preventive treatment and will arrange for this treatment.

We should avoid giving antibiotics to people who are casual contacts to prevent meningococci from becoming resistant to antibiotics. It is important to keep antibiotics effective for those who actually need treatment.

There are healthy carriers of meningococci

About one person in ten carries meningococci in their upper respiratory tract. These persons do not get the disease and do not need to be treated.

Are there vaccines against meningitis?

Yes, there is a vaccine against some strains of *N. meningitidis*. The vaccine is very safe and highly effective but it is not routinely used in the United States and is not effective in children under 18 months of age.

The vaccine against *N. meningitidis* is sometimes used to control outbreaks of some types of meningococcal meningitis in the United States.

There are NO large epidemics of meningococcal meningitis in the USA nowadays

Large epidemics of meningococcal meningitis do not occur in the United States, however some countries experience large, periodic epidemics. Overseas travelers should check to see if meningococcal vaccine is recommended for their destination. Travelers should receive the vaccine at least 1 week before departure, if possible.