

Meningococcal Disease

What is meningococcal disease?

- Meningococcal disease is any illness caused by the bacteria *Neisseria meningitidis*.
- It is the leading cause of bacterial meningitis in children 2-18 years of age in U.S.
- Meningococcal disease can be very serious, even life-threatening in 48 hours or less.
- The two most severe and common illnesses caused by meningococcal bacteria include;
 - Meningitis - an infection of the fluid and lining around the brain and spinal cord
 - Septicemia - a bloodstream infection

What are the symptoms?

- Symptoms of meningococcal disease are similar to influenza (flu) and may include:
 - Sudden onset of a high fever
 - Headache
 - Stiff neck
 - Nausea
 - Vomiting
 - Increased sensitivity to light
 - Rash
 - Confusion
 - Severe aches and pain in the muscles, joints, chest or belly

How does meningococcal disease spread?

- Meningococcal disease is spread person to person by sharing respiratory secretions, through kissing or coughing, close or lengthy contact, and among people who share a room or live in the same household.
- Anyone can get meningococcal disease, but teens and college freshmen who live in residence halls are at increased risk.
- Some people can “carry” meningococcal bacteria in their nose and throat without getting meningococcal disease but can still infect other people.
- Most cases of meningococcal disease are spread by people who “carry” the bacteria with no symptoms, appear to be random, and not linked to other cases.
- Meningococcal outbreaks can occur in communities, schools, colleges, prisons, and in other high-risk populations.

Who should get meningococcal vaccine?

- Meningococcal vaccine(s) is recommended for all preteens and teens.



Alabama Department of Public Health

Immunization Division, 201 Monroe St, Montgomery, AL 36104

1-800-469-4599 www.alabamapublichealth.gov/immunization 11/01/2017

- All 11- and 12-year-olds should be vaccinated with serogroups A, C, W, and Y meningococcal conjugate vaccine (MCV4). A booster dose is recommended at age 16.
- Teens and young adults, 16 through 23-year-olds, may also be vaccinated with a serogroup B meningococcal vaccine (SBMV), preferably at 16 through 18 years old.
- Both MCV4 and SBMV can be given at the same time, talk to your provider.
- Teens with HIV should get three doses of MCV4.
- People 55 years of age and older should get Meningococcal polysaccharide vaccine (MPSV4).

Who should be vaccinated because they are at increased risk?

- College freshmen living in dormitories.
- Laboratory personnel exposed to meningococcal bacteria.
- U.S. military recruits.
- Anyone traveling or living where meningococcal disease is common, like Africa.
- Anyone with a damaged spleen or who had the spleen removed.
- Anyone with an immune system disorder.
- Anyone exposed during a meningococcal meningitis outbreak.

What are the vaccine side effects and risks?

- MCV4 and SBMV is safe, but side effects can occur.
- Most side effects are mild or moderate and do not affect daily activities.
- The most common side effects in preteens and teens occur where the injection is given and may include pain, tenderness, swelling, and hardness of the skin.
- Other common side effects may include nausea, feeling a little run down, and headache.
- Some preteens and teens may also faint after getting a vaccine.
- Reactions usually last a short time and get better within a few days.

Where can I find more information?

- Ask your doctor.
- Call the Alabama Department of Public Health, Immunization Division, at 1-800-469-4599.
- Go to cdc.gov and type meningococcal disease in SEARCH box.



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Prevention and Control Measures:

- Initiate control measures *within 3 days of initial case notification*
- Identify exposed/ high risk close contacts, including household contacts, child care contacts, etc.
 - High risk contact definition (contacts at highest risk of severe disease or transmitting disease to others at high risk)
 - Infants <1 year of age
 - Pregnant women
 - Caregivers & household contact of infants (e.g., family members, friends, or babysitters who spend time caring for an infant)
 - All those attending or working in a childcare setting (i.e. same room)
 - Healthcare workers who care for infants < year of age or pregnant/postpartum women
 - Unimmunized/underimmunized children and
 - Immunocompromised persons
- Chemoprophylaxis should be recommended for all household members and other persons deemed to have been exposed, regardless of their immunization status
 - Chemoprophylaxis is not recommended for persons who have had only brief or casual contact with the case. If such persons are anxious about their exposure, they should be advised that their risk of disease is extremely low and possibly referred to their own physician for further discussion if needed.
- Contacts that are experiencing symptoms compatible with meningococcal disease (fever, rash, lethargy, irritability, headache, stiff neck, vomiting, and rash) should be referred to a health care provider immediately for evaluation
 - Obtain immunization history of case/contacts
- Provide education that includes basic information about the disease, its complications, and ways to treat and prevent transmission of illness.
 - Instruct cases and contacts on the necessary isolation or any other restrictions
 - Counsel contacts to watch for signs or symptoms of mumps occurring within 2-10 days after exposure and to seek medical care promptly



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