

West Virginia Department of Health and Human Resources

Information for the Public - Meningococcal Meningitis

What is meningococcal meningitis?

Meningococcal meningitis is an infection of the fluid surrounding the brain and spinal cord. People with meningococcal meningitis may have fever, headache, nausea, vomiting, a stiff neck, and rash. With modern treatment, the fatality rate is 5 to 15%.

What causes meningococcal meningitis?

Meningococcal meningitis is caused by the bacteria *Neisseria meningitidis*, also called meningococcus.

How is meningococcal meningitis spread?

Meningococcus is spread from one person to another by “sharing saliva.” Examples include:

- Sharing eating utensils or drinking cups;
- Kissing on the mouth;
- Sharing a cigarette; and
- Mouth-to-mouth resuscitation.

Meningococcal meningitis can also spread in very crowded situations, including:

- Daycares;
- Barracks; or
- Jails.

Meningococcal meningitis is not spread by:

- Being in the same room as a person who got meningitis (without “sharing saliva”), e.g., the same workplace or classroom; or
- Knowing someone who knows a person who got meningococcal meningitis.

Who is most at risk for meningococcal meningitis?

People who have certain medical conditions are at higher risk, including:

- Those with complement deficiency (a type of immune deficiency); and
- Those who do not have a spleen.

Certain other factors may place individuals at higher risk, including:

- Exposure to tobacco smoke;
- Age less than 4;
- Recent cold or upper respiratory infection; and
- Household crowding.

Many people can carry the meningococcus bacteria in their nose or throat without getting ill. In this way, many people become immune to meningococcal meningitis by adulthood. That is why healthy adults are at low risk for meningococcal meningitis.

Do I need to take antibiotics to prevent meningococcal meningitis?

A person needs to take antibiotics to prevent meningococcal meningitis if he/she:

- Lives in the same house with a person who got meningococcal meningitis;
- In the last seven days, attended the same daycare classroom as a person who got meningococcal meningitis;
- Shared a toothbrush, eating utensils, or drinking cup with a person who got meningococcal meningitis;
- Frequently eats or sleeps in the same house as a person who got meningococcal meningitis; or
- Kissed the mouth of a person who got meningococcal meningitis.

A person does not need antibiotics to prevent meningococcal meningitis if he/she:

- Did not have direct contact with the saliva of a person who got meningococcal meningitis, e.g., a school or work-mate;
- Knows someone who knows a person who got meningococcal meningitis; or
- Was exposed to someone with meningococcal meningitis more than 10 days ago and is well.

Talk to your local health department to help you determine if you need antibiotics.

Is there a vaccine for meningococcal meningitis?

Yes. The vaccine is recommended for persons age two and older who have:

- Complement deficiency; or
- No spleen or a spleen that does not work properly.

The vaccine is also recommended for people who will travel to areas (e.g., Sub-Saharan Africa) where meningococcal meningitis is more common, and for laboratory workers who work with the bacteria. College students may also consider having the vaccine. After careful consideration and planning, the vaccine is sometimes used to stop outbreaks of meningococcal meningitis.

What is an “outbreak” of meningococcal meningitis?

West Virginia has about 10 to 20 cases of meningococcal disease every year. An outbreak is an “unusual increase” above this expected number of cases. To prevent outbreaks, West Virginia’s local health departments:

- Thoroughly investigate every reported case of meningococcal disease; and
- Give antibiotics to persons who need them to prevent illness.

This prevention activity goes on every time a case of meningococcal meningitis is reported.