

Meningococcal Disease Fact Sheet

for EMS, Public Safety, and First Responders

What is meningococcal disease?

Meningococcal disease is a disease that can cause meningitis and septic shock.

What is the cause of meningococcal disease?

A bacteria known as *Neisseria meningitidis*.

Where are these bacteria found and how are they spread?

These bacteria can be found in the respiratory tracts of approximately 10% of people and are spread person-to-person in small droplets of saliva or nasal secretions (droplet spread).

Does everyone who has *Neisseria meningitidis* in their respiratory tract develop disease?

No, most persons with these bacteria in their respiratory tract will not develop disease. However, in rare cases *Neisseria meningitidis* can cause meningitis or a bloodstream infection called meningococemia that is often associated with hypotension, shock, and/or a rash.

What are the symptoms of meningococcal disease?

People with meningococcal disease are usually very ill and may have meningitis or septic shock. Meningitis is an infection of the fluid of the spinal cord and the fluid that surrounds the brain. High fever, headache, and stiff neck are common symptoms of meningitis in anyone over 2 years of age. In infants, the only symptoms may be inactivity, irritability, vomiting, or poor feeding. Patients of any age may have seizures. Septic shock occurs when *Neisseria meningitidis* bacteria invade the bloodstream. Persons with septic shock may also have a rash.

Is *Neisseria meningitidis* the only cause of meningitis and septic shock?

No. It is important for you to know that meningitis and septic shock can be caused by many different pathogens and that *Neisseria meningitidis* is not the most common cause of either.

How can I protect myself from exposure?

If you suspect that a patient has meningococcal disease, wear a surgical mask if one is available and, as always, clean your hands after patient contact.

Are preventive antibiotics recommended for all meningitis exposures?

No. Meningococcal disease is the only cause of meningitis for which preventive antibiotics may be recommended after exposure.

When would preventive antibiotics be recommended for a meningococcal disease exposure?

Usually only household contacts and close contacts having direct exposure to a patient's oral secretions need to take antibiotics. Preventive antibiotics are not recommended for public safety personnel or first responders unless they have had direct exposure to a patient's oral secretions during procedures such as:

- unprotected mouth-to-mouth resuscitation
- intubation
- suctioning¹

Without this kind of direct contact with a patient, there is no increased risk of becoming infected with this illness.



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Is there concern about any other types of exposures?

N. meningitidis bacteria generally don't survive very long outside the body. They can't "infect" homes or buildings, or contaminate physical objects.

If I have the type of exposure to a patient that makes it necessary for me to take antibiotics, will I be able to "carry" this illness home to my family?

No.

Is meningococcal disease reportable to the Minnesota Department of Health (MDH)?

Yes.

How many cases of meningococcal disease are reported each year in Minnesota?

30 to 40 cases.

Who investigates cases and identifies persons who need to take preventive antibiotics?

MDH or local public health investigates each case and ensures that public safety personnel and first responders who are identified as having been exposed are notified of their exposure and evaluated to determine if they need antibiotic treatment. In some communities and at some hospitals, the hospital infection control practitioner will contact emergency medical services and first responder services with this information.

Who do I call if I think I may have been exposed to a patient with meningococcal disease?

You may call MDH at 651-201-5414 (or toll free at 1-877-676-5414). While MDH staff cannot share a patient's diagnosis without specific permission from the patient or his/her next of kin, they can evaluate your exposure and advise you whether or not antibiotic treatment is indicated. Suspect cases are not always reported to MDH immediately so we may learn of a new case from you.

What should I do if I have been exposed to a patient with meningococcal disease in the last 10 days and develop an illness with a fever?

Seek medical attention immediately and make sure your healthcare provider is aware of your exposure, even if you have taken preventive antibiotics.

Who do I call if I have other infectious disease questions?

Please call the Minnesota Department of Health at 651-201-5414 (or toll free at 1-877-676-5414).

Reference:

1. American Academy of Pediatrics. Meningococcal Infections. In: Pickering LK, ed. Red Book: 2003 Report of the Committee on Infectious Diseases. 26th ed. Elk Grove Village, IL: American Academy of Pediatrics; 2003: 430-436.