

Meningococcal Infection

Meningitis is an inflammation of the lining of the brain and has many causes including bacterial, viral, fungal and parasitic. A particular bacterium called “meningococcus” can be aggressive and lead very quickly to a life threatening illness. Meningococcus causes epidemics of meningitis especially in some countries in Africa (across the meningitis belt) and some parts of Asia and South America.



HOW DO YOU CATCH IT?

The bacteria enter the body through the upper respiratory tract. The bacteria can be caught by inhalation, (e.g. when an infected person coughs or sneezes on a person), by direct mouth to mouth contact with an infected person, or by indirect contact (e.g. by touching one’s nose after touching an object that is contaminated by an infected person’s nasal secretions).

The meningococcus does no harm at all in most people. However, in some people especially children less than 5 years old, and in young healthy adults serious infections can occur. The incubation period is between 1 – 10 days. The bacteria are particularly attracted to the lining of the brain, and can travel up into the small vessels inside the brain’s lining and deposit there. The symptoms of meningitis then begin with a severe headache and high fever, progressing to drowsiness, confusion and seizures. Neck stiffness, vomiting and a rash are other features. Meningococcal meningitis can be treated successfully with antibiotics if the infection is recognised in its early stages. If you are travelling in an area away from medical care, it may be important to arrange vaccination. However, serious illness and even death can occur in 24 – 48 hours. If possible, avoid crowded areas such as public transport and market places as people may cough and sneeze in close proximity, increasing your risk of exposure to bacteria.

DISEASE RISK



The disease is most common in poor and overcrowded areas and increases in the winter and spring. Epidemics occur frequently in the Sub-Saharan “meningitis belt” across the middle of Africa, especially during December to June. It also occurs on an irregular basis in other countries.

In Australia there are a handful of severe cases of meningococcal infection each year, but here in Western Australia the majority of cases are due to the Meningococcal strain type B, for which there is currently no effective vaccination.

Places where travellers should be aware of the possibility of being exposed to this infection include -



AFRICAN COUNTRIES		OTHERS
Angola	Liberia	Bangladesh
Benin	Malawi	Bhutan
Burkina Faso	Nigeria	Brazil
Burundi	Mali	Comoros
Cabinda	Mauritania	India / Nepal
Cameroon	Morocco	Mongolia
Central African Republic	Mozambique	Pakistan
Chad	Niger	Sao Tome & Principe
Cote D'Ivoire	Rwanda	Saudi Arabia (required by law for all visitors)
Democratic Republic of the Congo	Senegal	Vietnam
Djibouti	Sierra Leone	
Eritrea	Somalia	
Ethiopia	Sudan	
Gabon	Tanzania	
Ghana	Togo	
Guinea	Uganda	
Guinea-Bissau	Zaire	
Kenya	Zambia	

HOW CAN YOU AVOID MENINGOCOCCAL MENINGITIS?

Meningococcal meningitis is preventable by vaccination. The vaccine offers approximately 85 - 90% protection against meningococcal meningitis strains A, C, W and Y. The most common strains overseas are A & C and the vaccine remains effective for three years. It takes 10 days to become effective. Side effects are uncommon and mild usually consisting of local tenderness and redness at the site of injection for 1 – 2 days. Up to 2% of children develop a transient fever after vaccination. Occasionally people suffer a mild headache, neck stiffness and muscular pain within 48 hours.

There are new vaccines which cover the group C strain only, and these vaccines will remain effective for probably at least 20 years. The government have introduced a vaccine program for young children and adolescents using this vaccine, and we can also provide this to those at risk.



Stay healthy by eating well and maintaining your fluid intake. Don't let your body get worn down and allow time for adequate sleep. If possible stay away from crowded areas frequented by local inhabitants, avoid other close physical contact and be diligent with hand washing. Seek medical advice at once if you are concerned that you may have contracted meningococcal infection.