



Meningococcal Disease Fact Sheet

What is meningococcal disease?

Meningococcal disease is a severe bacterial infection of the blood and meninges (the thin covering of the brain and spinal cord). It is a relatively rare disease caused by infection with the bacteria *Neisseria meningitidis*. About 1 in 10 people have these bacteria in the back of their nose and throat without being ill.

How is this disease spread?

Meningococcal disease spreads by direct contact with the saliva or with respiratory droplets from the nose and throat of the infected person. Generally, it takes close or lengthy contact to spread these bacteria.

Who is at risk of getting this disease?

Persons considered at increased risk of getting disease from a case include household members, close friends/daily playmates, and health care workers who had direct saliva contact (such as may occur during resuscitation).

Persons who are not considered at increased risk include those who have had casual contact with the case, such as occurs in a regular classroom, office, or factory setting.

What are the symptoms?

Infection causes fever, intense headache, nausea and often vomiting, stiff neck, and frequently a rash. It may be

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difficult to notice the classic symptoms listed above for babies. Instead, babies may be slow or inactive, irritable, vomiting, feeding poorly, or have a bulging in the soft spot of the skull. If symptoms occur, the ill person should see a doctor immediately.

How soon do the symptoms appear?

The symptoms may appear 2 to 10 days after infection, but usually within 3 to 4 days.

What is the treatment for meningococcal disease?

Meningococcal disease is very serious and can be deadly in a matter of hours. Early diagnosis and treatment are very important. Antibiotics, such as penicillin and ampicillin, are used to treat meningococcal disease. In previous years, up to 50% of the people with clinical disease died. Today, with early diagnosis and treatment, only 5 - 15% of cases die.

Should people who have been around a person with meningococcal disease be treated?

Household members and close friends/daily playmates of infected persons, as well as health care workers who had direct saliva contact with the infected person, should generally receive an antibiotic called rifampin. The antibiotic does two things: 1) it reduces the risk of disease among these persons, and 2) it eliminates the bacteria from the nose and throat of these persons so that it may

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not be further spread in the community. Persons who are not considered at increased risk, such as classmates and co-workers, do not need treatment with the antibiotic.

What can be done to stop the spread of the bacteria?

Anyone with cold or flu-like symptoms should cover their mouths and noses with disposable paper tissues when sneezing or coughing. Maintaining healthy habits, like getting plenty of rest and not having close contact with people who are sick, also helps.

Is there a vaccine to prevent meningococcal disease?

There is a vaccine for some strains of meningococcal disease, however it is not recommended for everyone. It is recommended for persons without a functional spleen and for persons whose immune systems are compromised. College freshmen who live in dormitories are at a higher risk for meningococcal disease and should talk with their physician about possibly receiving the vaccine.

*For further information, contact the
Oklahoma City-County Health
Department (405) 425-4437*

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