

Meningococcal Disease | Know the symptoms

Don't wait – seek help

Meningococcal disease

Meningococcal disease is an infection caused by a bacteria, and can lead to two very serious illnesses:

- **Meningitis** (an infection of the brain membranes)
- **Septicaemia** (blood poisoning)

More people die from septicaemia than from meningitis.

There are several different types of meningococcal bacteria, including A, B, C, W and Y. Most cases in New Zealand are caused by group B.

Meningococcal disease can begin very quickly – in just a few hours people can become very unwell.

The illness

Illness may develop slowly over one or two days, or may develop quickly over just a few hours. It can be treated with antibiotics, but early treatment is very important. At the start of the illness, meningococcal disease can look like influenza (flu) or a cold, but it can then become worse very quickly. Sometimes a person can feel unwell and then feel better again before becoming very ill, very quickly.

Meningococcal disease cannot be treated at home – it is important to seek medical help straight away

The symptoms of meningococcal disease are the same as a number of minor illnesses that get better by themselves. Meningococcal disease cannot be treated at home – it is important to seek medical help straight away.

If you are concerned that someone has meningococcal disease, call your GP, Healthline (0800 611 116) or after hours centre and arrange to have them seen urgently. If you cannot get an appointment, take them to the Emergency Department at your nearest hospital or call 111.

If you are a parent or caregiver you should trust your own judgment – you are the person most likely to recognise that your child is sicker than usual and that they are getting worse quickly. If you can't get help any other way then dial 111 for an ambulance.

Who is most at risk?

Meningococcal disease can affect anyone. However, babies, children under 5 years old, teenagers and young adults living in halls of residence or flatting are at greater risk and should be immunised. People can catch it at any time of the year, but it's more common in winter and spring.

All babies under the age of one, and Māori and Pacific children under 5 years old have the highest risk. Exposure to tobacco smoke, living in a crowded household or having another respiratory infection like the flu (influenza) can increase a person's chances of catching the disease, so consider getting your annual flu injection for you and your tamariki.

Prevention

Meningococcal disease is spread in a similar way to the common cold – by coughing and sneezing.

Usually the bacteria sit harmlessly in the back of healthy people's noses and throats and are not passed on to others. The bacteria don't survive for long outside of the body, so it is difficult to spread the disease between people. Meningococcal disease is more likely to spread among people staying together in the same house or who are in very close contact with each other.

Basic steps like covering your nose or mouth when you sneeze or cough, and washing and drying your hands, can help reduce the chance of spreading bacteria. Avoid sharing items which may have saliva on them like drink bottles, lip balm or vapes.

Signs and symptoms

The symptoms of meningococcal disease may not all show up at once. Some symptoms, such as fever, are very common. Seek help immediately if you notice any combination of the following signs and symptoms. Call your GP, Healthline (0800 611 116) or after hours centre. If you cannot get an appointment, take the person to the Emergency Department at your nearest hospital or call 111.

Meningococcal disease has a range of general symptoms. These include:

- high fever
- headache
- confusion
- sleepiness
- joint and muscle pains.

There can also be more specific symptoms, such as:

- rash
- a stiff neck
- dislike of/sensitivity to bright lights
- vomiting
- crying
- refusal to feed (in babies)
- may have a bulging fontanelle (soft spot on head)
- seizure or fit.

Babies may have cool hands and feet, spots on their body and might refuse to feed. Adults may be sleepy, confused, behave strangely or become unconscious.

A rash consisting of reddish-purple pin-prick spots or bruises, that don't disappear when you press on them with a glass, is a very worrying sign. You should call an ambulance immediately, if a rash like this appears in a sick child or adult.

The rash can occur anywhere on the body, but do not wait for it to appear before seeking medical help.

Around one in three people with meningococcal disease have no rash at all.

Act quickly

If you or someone in your household is sick with one or more of the symptoms outlined on the previous page, take action immediately.

- Ring a doctor, medical centre, after hours clinic or Healthline (0800 611 116) right away – whether it is day or night.
- Say what the symptoms are.
- If you think it might be meningococcal disease, don't be put off. Insist on immediate action.
- Even if a person has been checked by a doctor, they should still be watched.
- When being reviewed by a doctor ensure there are clear instructions given on when you should come back or call for more urgent help. Ask for these instructions to be written down.
- If they get worse go straight back to a doctor or the hospital. Tell medical staff if the person has already taken antibiotics, as these may mask the symptoms.
- Do not leave the unwell person alone.
- If it's an emergency call 111 and ask for an ambulance.

It is important that you are aware of the signs and symptoms of meningococcal disease, and seek medical advice quickly if you're concerned.

Immunisation against meningococcal disease

Vaccines for meningococcal disease are available for those at risk.

The vaccine for strains A, C, W and Y is funded for:

- Close contacts of meningococcal cases of any meningococcal group (A, B, C, W or Y).
- People who have had meningococcal disease in the past.
- People who are at higher risk of contracting meningococcal diseases because they have reduced immune function due to certain health conditions.

- Adolescents and young adults aged 13-25 years inclusive who will be living or are currently living in a boarding school, hostel or university hall of residence, military barracks or prison.

The vaccine for strain B is funded for:

- Close contacts of meningococcal cases of any meningococcal group (A, B, C, W or Y).
- People who have had meningococcal disease in the past.
- People who are at higher risk of contracting meningococcal B because they have reduced immune function due to certain health conditions including immunocompromised status.
- Children up to 12 months of age, administered as part of the childhood immunisation programme.
- People aged 13 to 25 years who are entering into or in their first year of specified close-living situations.
- Children aged 13 to 59 months (until 31 August 2025).
- People aged 13 to 25 years in any year of specified close-living (until 28 February 2024).

For more information about getting immunised against meningococcal disease

- talk to your GP, nurse or health centre
- call Healthline on **0800 611 116**
- immunise.health.nz/meningococcal

Where to go for advice on meningococcal disease

If you want to know more about meningococcal disease, talk to your doctor, practice nurse, or medical centre, or contact your local public health service.

For advice after hours (24 hour service), phone Healthline (**0800 611 116**)