Meningococcal Disease

What college communities need to know

Q. What is meningococcal disease?
A. Meningococcal disease is a rare, potentially life-threatening illness caused by the bacteria Neisseria meningitidis. The disease occurs when the bacteria invades the body, causing infections of fluids that line the brain and spinal cord (meningitis), and bloodstream (meningococcimia or sepsis). Fewer than one in 100,000 people in the United States are infected with the disease each year.

Q. What are the risks of meningococcal disease?
A. The disease can be fatal if not treated right away. Brain damage, hearing loss, loss of limbs and kidney failure are other risks.

Q. What are the signs of meningococcal disease?
A. Signs of meningococcal disease are similar to other illnesses and can be hard to identify. Early identification and treatment can prevent disability and even death. Symptoms include:

- Fever
- Headache and stiff neck
- Nausea
- Vomiting
- Sensitivity to light
- Confusion
- Fatigue
- Shaking chills
- Rapid breathing
- Severe aches and pains in muscles, joints, chest or belly

Q. When should a campus community member seek care?
A. Campus community members who notice these signs of illness should contact a health care provider. Key signs include fever, along with severe headache, stiff neck or rash. If the signs are unusually sudden or severe, seek emergency care.

Q. How is meningococcal disease spread?
A. The disease spreads when an uninfected person comes into close contact with the fluids of the nose and throat of an infected person. Close contact happens through:

- Sharing cups, beer or soda cans, or other drinking containers
- Sharing smoking devices (e.g., cigarettes, joints, e-cigarettes)
- Sharing silverware or plates
- Kissing
- Coughs and sneezes that are not covered

Approximately five to 10 of every 100 people carry N. meningitidis in their nose and throat but don’t have any sign of illness. They are considered carriers.

Q. Who is most at risk for meningococcal disease on college campuses?
A. Anyone can get meningococcal disease. However, college freshmen living in dormitories have a higher risk of developing meningococcal disease than other college students.
**Q. Why are college freshman in dorms at higher risk of developing meningococcal disease than other students?**

A. College freshmen’s immune systems may not recognize meningococcal bacteria and protect their bodies if they have not been around carriers or been a carrier. Living in close quarters and other aspects of campus life lead to increased opportunities for close contact and exposure to the bacteria.

**Q. How can meningococcal disease be prevented?**

A. Practice good hand hygiene. Avoid close contact. Follow a health care provider’s or health official’s instructions if told to take preventive medication after possible exposure. Get a meningococcal vaccine.

**Q. Are meningococcal vaccines recommended before coming to college?**

A. There are 13 groups, also known as serogroups, of *N. meningitidis*. Groups A, B and C make up approximately 90 percent of meningococcal disease cases. The proportion of cases caused by W, X and Y is increasing. In Oregon, the meningococcal vaccine recommended for college students covers groups A, C, W and Y. Some colleges and universities require this vaccine.

Protection against group B is not included in routine vaccines. Group B, or MenB, vaccine may be recommended when there are outbreaks of Group B meningococcal disease.

**Q. Public health officials have recommended MenB for some in my college, but not others. Why?**

A. During outbreaks, health officials may make recommendations specific to that outbreak including who in the campus community should be vaccinated, the brand of vaccine to use, and whether to lift the prescription requirement for certain groups at risk of infection.

Their decision is based on several factors, but the main factors are:

- **What we know about who is at risk.** We know some groups (freshmen living in dorms, those with certain medical conditions) are at higher risk of getting sick with MenB. In some circumstances, only the people at highest risk in the outbreak need the vaccine.

- **The circumstances of the outbreak that could influence who should get vaccinated and when include the following:** The outbreak’s setting, the people or groups most likely to have contact with the infected people, timing and likelihood that people will follow through with multiple doses of vaccine. Specific examples are:
  - Whether people infected during the outbreak live in close quarters such as dorms
  - Whether they belong to campus organizations that put them in close contact with others and
  - The size of their social circle

These things shape who may have been exposed, how many people have been exposed and who is at risk of future exposure.

- **How many doses manufacturers and other health partners can provide.** Some vaccines are widely available; others are not. MenB is very uncommon so less vaccine is manufactured than for other types of meningococcal disease. Local and state health officials may limit their recommendation if the supply of vaccine is not large enough. In an outbreak, health officials reach out to manufacturers, hospitals and other states to meet the need of the outbreak.