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HOWELL TOWNSHIP PUBLIC SCHOOLS

PROUD OF OUR SCHOOLS - CONCERNED FOR OUR CHILDREN

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Dear Parent/Guardian,

In accordance with N.J.S.A.18A:40-21.2, the New Jersey Department of Health and Senior Services has developed the attached fact sheets about Meningitis. All public schools are required to distribute the fact sheets to parents of students in grade six.

Should you have any questions about Meningitis, please direct them to your primary care physician.

Sincerely,

Patricia Callander
Assistant Superintendent/Pupil Services

PC:mk
Attachments

Meningococcal Invasive Disease



Frequently Asked Questions

What is meningococcal invasive disease?

Meningococcal (men-IN-jo-cah-call) invasive disease is a severe infection of the blood or the meninges (the covering of the brain and spinal cord). When the infection is in the blood, it is called meningococemia. When the infection is in the meninges, it is called meningococcal meningitis. Both of these infections are caused by a bacterium (germ) called *Neisseria meningitidis*.

What is *Neisseria meningitidis*?

It is a bacterium that may be found in the community. About 5 to 20% of people carry these bacteria in their noses and throats and do not get sick from them. In rare cases the bacteria may get into the blood or the tissue surrounding the spine and brain and cause severe illness.

Who gets meningococcal invasive disease?

It occurs in people of all ages but is more common in the very young (infants and young children) and the elderly (people above age 65). College students and military recruits are also slightly more at risk for the disease because of time spent in crowded living conditions like dorms or barracks.

How do people get meningococcal invasive disease?

The bacteria (germs) are spread from person to person through saliva (spit) or other respiratory secretions. You must be in **close contact** with a sick person's secretions in order for the bacteria to spread. Close contact includes activities such as:

- living in the same household
- kissing
- sharing eating utensils or food
- sharing drinks
- sharing cigarettes
- uncovered face-to-face sneezing or coughing

The bacteria are **NOT SPREAD** by casual contact activities like being in the same work or school room as the sick person, or handling books or other items that the sick person has touched. Likewise, being around a person who was in contact with the sick person does not put you at risk for catching meningococcal disease.

What are the symptoms of meningococcal invasive disease?

Because early symptoms may be mild and similar to those of less serious viral illnesses like a common cold, it would not be unusual for people to delay seeking treatment.

The early symptoms of meningococcal disease include:

- Fever
- Headache
- Body aches
- Feeling very tired or sleepy

Other symptoms that may occur are:

- Stiff neck
- Nausea
- Vomiting
- Confusion
- Sensitivity to light

Later in the illness, a rash appearing as purple blotches or spots on the arms, legs or torso may be seen.

What is the treatment for meningococcal invasive disease?

Most people with meningococcal invasive disease are hospitalized and treated with antibiotics. Because the illness can impair body function, ventilator assistance, kidney dialysis or other supportive treatments may be needed. (NOTE: It is very important to finish your antibiotics even if you begin to feel better, unless otherwise directed by your health care provider.)

How is meningococcal invasive disease diagnosed?

A health care provider diagnoses meningococcal invasive disease by observing symptoms and examining blood and spinal fluid.

Can people with meningococcal invasive disease pass the illness to others?

The infectious period for meningococcal disease is considered to be from 10 days before the person got sick to one day after he or she starts on antibiotics. This means that people who were in **close** contact with the sick person during this time are at higher than average risk to get meningococcal disease.

People who are identified as **close** contacts should receive antibiotics to prevent them from getting the disease. (NOTE: It is very important to finish your antibiotics even if you begin to feel better, unless otherwise directed by a health care provider.)

How can meningococcal invasive disease be prevented?

Getting vaccinated against meningococcal disease will protect people from getting this disease.

Two types of meningococcal vaccine are available:

- Meningococcal polysaccharide vaccine (MPSV4) has been available since 1978.
- Meningococcal conjugate vaccine (MCV4) became available in 2005.

Both vaccines are about 90% effective in protecting against four strains of meningococcal disease, including all but one of the most common strains found in the United States. MCV4 is currently preferred because it provides longer lasting immunity.

Who should get meningococcal vaccine?

Routine vaccination with MCV4 is recommended for all children aged 11-18 years old. It is also recommended for persons who are at increased risk for meningococcal disease. These include:

- Incoming college freshmen or military recruits who will live in dormitories or barracks.
- Anyone with an immune system disorder.
- Anyone with a damaged spleen, or whose spleen has been removed.
- Certain groups of people during a meningococcal outbreak.

What are the side effects of vaccination?

Meningococcal vaccines are very safe and effective. As with all vaccines, there can be minor reactions, including pain and redness at the injection site or a mild fever, which typically last for one to two days. Severe side effects, such as a serious allergic reaction, are very rare.

Where can I get more information on meningococcal invasive disease?

- Your health care provider
- Your local health department
- NJ Department of Health and Senior Services <http://www.nj.gov/health>
- Centers for Disease Control & Prevention
http://www.cdc.gov/ncidod/dbmd/diseaseinfo/meningococcal_g.htm
- Vaccine Information Statement
<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-mening.pdf>

This information is intended for educational purposes only and is not intended to replace consultation with a health care professional.
Adapted from Centers for Disease Control and Prevention

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