

How are the germs spread?

The germs that cause bacterial meningitis usually live harmlessly in the back of the throat. Most of us will carry them at some stage in our lives without becoming ill, and they help us build up natural immunity (protection against the disease). Occasionally, these germs get past the body's defences and cause infection.

The germs are passed from person to person through coughing, sneezing and intimate kissing. But they will rarely cause disease.

Meningitis and septicaemia can affect anyone at any age, but babies and young children are most at risk.

Did you know?

A recent Meningitis Trust survey shows that up to 10 million people in the UK know someone who has had meningitis.

How easy is it to catch meningitis?

Most cases happen alone, but when there is a case of meningococcal disease, there is a small chance that further cases can happen.

The local public health office may offer antibiotics to people who have been in close contact for a long period of time with someone who has meningococcal disease. This is to reduce the risk of further cases.

Treating meningitis

Bacterial meningitis and septicaemia need urgent medical treatment with antibiotics. If they are recognised and treated early, they are less likely to become life-threatening or cause serious after-effects.

After meningitis

At the Meningitis Trust, we believe that there may be as many as 500,000 people living in the UK today who have had meningitis or septicaemia. Many of these people are still living with the impact of this dreadful disease.

The serious and disabling after-effects are well recognised and include deafness, blindness, limb loss, learning difficulties and behavioural problems. The impact of the disease may also cause relationships to break down, people to lose their jobs and other major lifestyle changes.

For every person who has had meningitis, their family and the people around them will be affected and often their lives too will be changed for ever. A recent survey suggests that up to 10 million people in the UK know someone who has had meningitis.

Preventing meningitis

Vaccination is the only way to prevent meningitis. Effective vaccines are available to prevent some types of bacterial meningitis and these have dramatically reduced the number of cases in the UK. To continue this success, the number of people having the vaccines needs to remain high.

Meningococcal bacteria that cause disease usually belong to particular groups – A, B, C, W-135 and Y.

Vaccines that protect against meningococcal group C, Hib and pneumococcal bacteria are offered as part of the routine childhood immunisation programme.

Around 90% of meningococcal disease in the UK is caused by group B. There is currently no vaccine to prevent disease caused by this group.

The Meningitis Trust

We, the Meningitis Trust, are a registered charity set up in 1986 by families who had been affected by meningitis. We are committed to increasing understanding of the disease and providing specialised professional services to anyone who has been affected. These services offer emotional, practical and financial support to help people rebuild their lives.

Here are some of the ways we do this.

24-hour nurse-led helpline – a Freephone service, providing information and support seven days a week

Professional counselling – confidential counselling for people who have had meningitis and their families

Financial support grants – to help fund specialist training, equipment, activities, respite care (to give carers a break from caring) and funeral costs

Home visits – trained staff offer information and support in people's homes

One-to-one contacts – putting people affected by meningitis in touch with volunteers who have also experienced the disease

This is only made possible by donations from people like you, as we rely almost entirely on voluntary support to fund our work.



24-hour nurse-led helpline

0800 028 18 28

www.meningitis-trust.org

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What is meningitis?

Answering your questions about meningitis and meningococcal septicaemia



Meningitis and meningococcal septicaemia (blood poisoning) are serious diseases. They can strike in an instant but their impact can last a lifetime.

Despite recent developments in vaccines, there are still around 3000 cases of bacterial meningitis, and probably more than double that number of cases of viral meningitis each year in the UK. We believe there are hundreds of thousands of people living in the UK who have been affected by meningitis. The speed at which people become ill and the dramatic and sometimes devastating course of events make meningitis and septicaemia alarming diseases.

This leaflet provides important information about these diseases and explains the facts behind the fear. If you would like more information, please phone our 24-hour nurse-led helpline on **0800 028 18 28** or visit our website at www.meningitis-trust.org.

What is meningitis?

Meningitis is inflammation of the membranes that surround and protect the brain and spinal cord.

The most common germs that cause meningitis are viruses and bacteria.

Viral meningitis is rarely life-threatening, although it can make people very unwell. Most people make a full recovery, but sufferers can be left with after-effects such as headaches, tiredness and memory loss.

Bacterial meningitis can be life-threatening and needs urgent medical attention. Most people who suffer from bacterial meningitis recover but many can be left with a variety of after-effects and one in 10 will die.

Many different bacteria can cause meningitis. The main types are meningococcus, pneumococcus, TB and Hib.

The meningococcus is the most common cause of bacterial meningitis in the UK and causes the most public concern.

What is meningococcal septicaemia?

Meningococcal bacteria can cause both meningitis and septicaemia. Together these are known as meningococcal disease.

Meningococcal septicaemia can happen with meningitis or on its own. Septicaemia is generally more life-threatening than meningitis and can develop within a few hours. Septicaemia can also be caused by other germs.



Meningococcal bacteria

What are the signs and symptoms?

Meningitis and septicaemia are often difficult to recognise at first. In the early stages, signs and symptoms can be similar to other more common illnesses like flu.

Trust your instincts

If you suspect meningitis or septicaemia, get medical help immediately.

The common signs and symptoms of meningitis and septicaemia are listed opposite. Early symptoms can include fever, headache, nausea (feeling sick), vomiting (being sick), muscle pain and fever with cold hands and feet.

For a copy of our symptoms card please call **0800 028 18 28**.



Common signs and symptoms of meningitis and septicaemia

Babies and toddlers

Meningitis

- Fever
- Refusing food or vomiting
- Fretful, dislike being handled
- Pale blotchy skin
- Listless, unresponsive
- Drowsy, difficult to wake
- Unusual cry, moaning

Septicaemia

- Fever, cold hands and feet
- Refusing food or vomiting
- Pale blotchy skin
- Spots or rash, see 'The glass test'
- Floppy, listless, unresponsive
- Rapid breathing or grunting
- Drowsy, difficult to wake

Children and adults

Meningitis

- Fever
- Severe headache
- Vomiting
- Dislike bright lights
- Stiff neck, muscle pain
- Drowsy, difficult to wake
- Confusion and irritability

Septicaemia

- Fever, cold hands and feet
- Vomiting
- Severe muscle pain
- Spots or rash, see 'The glass test'
- Stomach cramps and diarrhoea
- Drowsy, difficult to wake
- Confusion and irritability

Symptoms can appear in any order and some may not appear at all. Meningitis and septicaemia often happen together. Be aware of all the signs and symptoms.

What about the rash?

- A rash that does not fade under pressure (see 'The glass test') is a sign of meningococcal septicaemia. The rash may begin as a few small spots anywhere on the body and can spread quickly to look like fresh bruises.
- The spots or rash are caused by blood leaking into the tissues under the skin.
- The spots or rash are more difficult to see on darker skin. Look on paler areas of the skin and under the eyelids.



Septicaemic rash



The glass test

Spots or a rash that do not fade under pressure will still be seen when the side of a clear drinking glass is pressed firmly against the skin.

A fever with spots or a rash that do not fade under pressure is a medical emergency.

If someone is ill or is obviously getting worse, do not wait for spots or a rash to appear. They may appear late or may not appear at all.

What to do if you suspect meningitis or septicaemia

- Contact your GP immediately. If your GP is not available, go straight to your nearest accident and emergency department.
- Describe the symptoms carefully and say that you think it could be meningitis or septicaemia.
- Early diagnosis can be difficult. If you have seen a doctor and are still worried, don't be afraid to ask for medical help again.