STATE OF NEW HAMPSHIRE

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Recommendations To Clinicians Regarding Meningococcal Meningitis

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The New Hampshire Department of Health and Human Services (NH DHHS) is reporting the fourth case of meningococcal meningitis in the past week. Two of these cases are culture confirmed and these are both serogroup B. All four are among young adults and three reside in southwestern New Hampshire. All four cases are currently hospitalized at Dartmouth Hitchcock Medical Center. The federal Centers for Disease Control and Prevention (CDC) has been consulted and is actively providing consultation for this situation.

The NH DHHS is conducting detailed investigations of all cases and making recommendations for chemoprophylaxis of close contacts. For all persons for whom prophylaxis is recommended, NH DHHS staff actively seek out these individuals to assure compliance with these recommendations.

RECOMMENDATION: At this time NH DHHS recommends that all clinicians increase their suspicion for meningitis and promote parent and public recognition of the symptoms of meningitis. Clinicians should be alert to the possibility of meningitis in any cases of worsening respiratory or febrile illness. History and physical exam inquiries should specifically focus on symptoms of meningitis including: high fever, severe headache, stiff neck, light sensitivity, altered mental status including excessive irritability or somnolence, and peripheral petechial or maculopapular rash. In any patient presenting with a rash and fever, meningitis should be an early consideration. The rash of bacterial meningitis can be a subtle finding, especially early in the disease. Distal extremities and pressure points from clothing should be examined for early signs of rash. Clinicians should also make every attempt to provide laboratory confirmation for suspect cases through culture of cerebrospinal fluid and blood. Latex agglutination tests can be used as a rapid screen but need to be specifically ordered and should not substitute for culture. Influenza rapid test **and** culture should also be taken on any suspect case. Please call the NH DHHS Public Health Laboratories for consultation at (603) 271-4661, or after hours 271-5300 and request the operator to call the public health laboratory contact.

DHHS recommends chemoprophylaxis of known close or household contacts to cases of disease. Chemoprophylaxis is helpful to eliminate nasal carriage and may prevent future infection, however it is not useful in aborting current incubating infection. Because serogroup B meningococcus is not a vaccine susceptible serogroup, control of this situation does not currently involve vaccination. Additionally, NH DHHS does not recommend mass chemoprophylaxis as a control strategy.

If you diagnose a suspect case or have questions about these recommendations please contact us. Clinicians should contact 271-4496, or after hours 271-5300 and request to page the public health nurse on call. During business hours the public may be referred to the State of New Hampshire Department of Health and Human Services at 1-866-273-6453 or 911.