

Single case of bacterial meningitis reported

(March 8, 2019) – An undergraduate student at the University of Louisville has been diagnosed and hospitalized with bacterial meningococcal meningitis. The student resides in a UofL residential hall with a roommate who has not shown symptoms of the disease but is being treated preventively for it.

The student remains in good condition and is being cared for and monitored by physicians and other providers with Campus Health Services, UofL Hospital and UofL Physicians. Because of patient privacy laws, no other information about the student can be shared.

Bacterial meningitis is contagious but is only transmitted through direct exchange of respiratory or throat secretions. Most people who come into contact with a person who has meningitis are not at risk for the disease as long as precautions are taken.

For more information about meningitis prevention and treatment, the following FAQs are provided. Members of the UofL community also can contact Campus Health Services at **502-852-6479** or their own physician/health care provider.

Bacterial Meningitis FAQs

What is meningitis?

Meningococcal meningitis is caused by a type of bacteria called *Neisseria meningitides* that can infect the lining of the brain and spinal cord. There are a few different types or strains of *Neisseria meningitides*. In the United States, types B, C and Y cause the majority of disease.

In the US, approximately 800 to 1,500 people are infected with meningococcal meningitis and 120 die from the disease per year. About one of every five survivors live with permanent disabilities, such as seizures, amputations, kidney disease, deafness, brain damage and psychological problems.

Is bacterial meningitis contagious?

Bacterial meningitis is contagious, but generally is transmitted through direct exchange of respiratory and throat secretions by close personal contact, such as coughing, sharing drinks, kissing and being in close proximity for an extended period, such as closer than 3 feet for 8 or more hours. Those who are determined to have had close contact should receive see a health care provider to receive prophylactic antibiotics.

Did I have close contact?

Close contacts includes people in the same household, roommates, or anyone with direct contact with the patient's saliva (such as a boyfriend or girlfriend through French kissing, sharing cups, sharing cigarettes, coughing respiratory secretions, etc).

How can transmission be prevented?

- (1) Bacterial meningitis is best prevented by vaccination. Currently there are two different meningitis vaccines for adolescents and adults that cover the four strains typically encountered in the United States.
- (2) DO NOT share anything that comes in contact with someone else's mouth such as water bottles, lip balm, toothbrushes, towels, drinking glasses, eating utensils, cosmetics, smoking materials, food or drink from common source (e.g., punch bowl).
- (3) Frequent hand washing or using a hand sanitizer with at least 60 percent alcohol.
- (4) Close contacts should see their health care provider to receive prophylactic antibiotics.

What are the symptoms?

Symptoms of bacterial meningitis include high fever, headache and stiff neck. Other symptoms may include nausea, vomiting, confusion and sensitivity to light. Later in the illness, a rash that looks like purple blotches or spots on the arms, legs and torso may appear.

How long until symptoms begin to present after exposure?

Symptoms can develop for up to 2 weeks following an exposure.

Isn't there a vaccine for meningitis?

Yes, there are two vaccines against meningitis. Meningococcal conjugate vaccine (MenACWY) and Meningococcal Type B vaccine are both licensed protection against meningitis. In order to be fully immunized against Meningococcal disease you need to receive both of the vaccines.

For information about the Meningitis B vaccine, see the CDC FAQ or make an appointment with [Campus Health Services](#) at 502-852-6479 (Belknap Campus) or 502-852-6446 (Health Sciences Center).

Who is at higher risk from meningococcal meningitis?

In addition to infants, adolescents, young adults between 16-21 and the elderly, college students especially in residential housing arrangements are at greater risk of contracting bacterial meningitis.

Individuals with certain medical conditions also are at especially high risk of developing bacterial meningitis including individuals with immune problems (complement deficiencies) and anyone who has had their spleen removed.

For additional questions, please contact Campus Health Services at (502) 852-6479.