



Nebraska Department of Health and Human Services

HEALTH ALERT NETWORK

Advisory



TO: Primary care providers, ERs, public health in Washington, Dodge, and Burt counties

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RE: Public Health Recommendations for Suspected Meningococcal Infection

DATE: October 15, 2014

On October 14th, we received a report of suspected meningococcal infection in a three year old child. Cultures on that child are pending. Because the child received antibiotics prior to specimen collection, the ability to detect an infectious agent may have been compromised. The child was first seen in an emergency room and then transferred to Children’s Hospital.

The child lives in Burt County and attends a pre-school in Washington County. Public health recommendations are to prophylax household contacts, classmates and teachers in his pre-school class, and healthcare workers who may have been exposed to saliva or respiratory secretions.

Rifampin, ciprofloxacin, and ceftriaxone are all appropriate drugs for chemoprophylaxis.

Antibiotic	Dosage	Comment
Rifampin	Twice orally per day for two days Adults 600 mg per dose Children > or = 1 month 10 mg/kg Children < 1 month 5 mg/kg	Should not be given to pregnant women; may reduce effectiveness of oral contraceptives. May cause discoloration of urine and contact lenses
Ceftriaxone	Adults 250 mg IM Children < 15 years 125 mg IM	Can be given if compliance to prescription may be problematic

Ciprofloxacin	Adults one dose, 500 mg orally	Not usually recommended for persons aged <18 years or for pregnant women and lactating women because it causes cartilage damage in immature laboratory animals. Can be used for chemoprophylaxis of children when no acceptable alternative therapy is available. §
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§ Recent literature review identified no reports of irreversible cartilage toxicity or age-associated adverse events among children and adolescents (Source: Burstein GR, Berman SM, Blumer JL, Moran JS. Ciprofloxacin for the treatment of uncomplicated gonorrhea infection in adolescents: does the benefit outweigh the risk? Clin Infect Dis 2002;35:S191–9).

There is no need for family members or contacts to receive prophylaxis as they would not have exposure to the ill child. Because of the seriousness of this infection and the rapidity of onset, there are heightened concerns in the affected communities and reports of entire families requesting/demanding prophylaxis. Clinicians should adhere to public health recommendations: the only persons who need prophylaxis are those in close contact with the ill child.

For further questions, please call Elkhorn Logan Valley Public Health Department at 402-529-2233 or Three Rivers Public Health Department at 402-727-5396.