

CHP investigates case of invasive meningococcal infection

The Centre for Health Protection (CHP) of the Department of Health today (February 14) is investigating a case of invasive meningococcal infection and reminds the public to avoid direct contact with droplets from carriers or infected persons and to maintain good personal and environmental hygiene at all times to minimise the risk of contracting this serious disease.

The case involves a 73-year-old male with underlying diseases, who presented with high fever and decreased consciousness since February 12. He attended the Accident and Emergency Department of Kwong Wah Hospital on the same day and was admitted for treatment. His blood sample and cerebrospinal fluid specimen tested positive for *Neisseria meningitidis* upon laboratory testing. His clinical diagnosis was meningococcaemia and meningitis. He passed away today. Initial investigation revealed that the patient had no travel history during the incubation period.

Meningococcal infection is caused by a bacterium known as meningococcus. It is mainly transmitted by direct contact with respiratory secretions, including droplets from the nose and throat, of infected persons. The incubation period varies from two to 10 days and is usually three or four days. The clinical pictures among the infected may vary. Severe illness may result when the bacteria invade the bloodstream (meningococcaemia) or the membranes that envelop the brain and spinal cord (meningococcal meningitis). Meningococcaemia is characterised by a sudden onset of fever, an intense headache, purpura, shock and even death in severe cases.

To prevent meningococcal infection, members of the public are advised to take the following measures:

- Wash hands with liquid soap and water properly, especially when they are soiled by respiratory secretions, e.g. after sneezing, and clean hands with alcohol-based handrub when they are not visibly soiled;
- Cover the nose and mouth when sneezing or coughing, hold the spit with a tissue, dispose of nasal and mouth discharge in a lidded rubbish bin, and wash hands immediately;
- Avoid crowded places;
- Avoid close contact with patients who have a fever or severe headache;
- Consult doctors about meningococcal vaccination before travelling to high-risk areas; and
- Seek medical advice if you become ill after returning from high-risk areas, and discuss your recent travel history with your doctor.

The public may visit the CHP's [website](#) for more information on meningococcal infection.