

<p><b>IN THIS ISSUE:</b></p> <ul style="list-style-type: none"> <li>▪ <b>Alert: Notification of a case of Invasive Meningococcal Disease (IMD)</b></li> </ul>	<p><b>FROM:</b> David L. Mowat, MBChB MPH FRCPC Medical Officer of Health</p>
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**Notification of a case of Invasive Meningococcal Disease (IMD)**

An 18-year-old female high school student died of Invasive Meningococcal Disease (IMD) on Wednesday, June 9 in Brampton.

Onset of symptoms occurred Sunday, June 6 with fever, chills, diarrhea, nausea, vomiting and abdominal pain and a diffuse purpuric rash. Gram negative diplococci have been identified and the serotype is pending. This student had Meningitis C immunization in 2005.

We are referring **close contacts** of this case to physicians for chemoprophylaxis.

**Close contacts** are defined as:

- Household contacts of a case
- Persons who share sleeping arrangements with a case
- Persons who have direct contact with the oral/nasal secretions of a case (e.g., kissing on the mouth, shared cigarettes, shared drinking bottles)

**Close contacts** should receive antibiotic chemoprophylaxis by **June 14, 2010**.

**Signs and symptoms of meningitis include:**

- Rapid onset of fever
- Headache
- Stiff neck
- Nausea and vomiting
- Drowsiness or confusion
- Petechial and/or purpuric rash

Recommended chemoprophylaxis regimens (one of the following):

Drug	Dosage
Ciprofloxacin*	Adults and adolescents: 500 mg PO x 1 dose
Rifampin*	Adults and adolescents: 600 mg PO q12h x 4 doses
Ceftriaxone	Adults and adolescents: 250 mg IM x 1 dose

\* Contraindicated in pregnancy

Please refer to the Compendium of Pharmaceuticals and Specialties (CPS) for more details on doses for children, contraindications, warnings and possible side effects.

At this time, we are not recommending immunoprophylaxis with vaccination while the serotype is pending. If immunization is required, another notice will be sent.

For further information, please contact Peel Public Health at 905-799-7700.