

Can meningitis recur?

Once a person has had meningitis, they usually become immune to that particular type of meningitis (except children under 2 years of age, who may not develop adequate immunity after Hib meningitis), but may still require vaccination to prevent recurrence.

A person who has had one form of meningitis is no more likely to contract other forms of meningitis than any other person, unless they have an immune deficiency.

Where can I get more information on meningitis?

In some instances hospitals will refer patients to a specialist rehabilitation centre for assessment and advice about rehabilitation. Alternatively, patients may be referred to a physiotherapist in their local community. Consultants will normally see both children and adults who have had bacterial meningitis a few weeks after leaving hospital to check there are no concerns or complications. In addition, The Meningitis Centre can be contacted for information relating to meningitis on telephone (08) 9489 7791.

About the Meningitis Centre

The Meningitis Centre was founded in association with the Western Australian Institute for Child Health Research (now the TVW Telethon Institute for Child Health Research), by a small group of dedicated parents, medical researchers and health specialists. The Centre aims to offer support to meningitis sufferers and their families, to provide information on meningitis to parents, interested community members and health professionals and to support continued research into meningitis.

This pamphlet has been produced for people whose lives have been touched by meningitis. It was prepared by The Meningitis Centre for the parents of children who have suffered from this disease, in consultation with medical experts.

We hope it will help you understand what has happened, what to look for and how to cope with what may lie ahead.

More Information

For more information about The Meningitis Centre and how it can help you contact:

The Meningitis Centre

TVW Telethon Institute for Child Health Research
100 Roberts Road, SUBIACO WA 6008
or PO Box 855 WEST PERTH WA 6872
Phone: (08) 9489 7791 Freecall: 1800 250 223
Fax: (08) 9489 7705

Department of Health

Phone: (08) 9388 4999
HealthDirect WA: 1800 022 2222

The Meningitis Centre

MANAGE THE MINUTES Every Second Counts



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Recovering from Meningitis

Vomiting
Fever
Severe Headache
Stiff Neck
Changing Moods
Rash
Fitting
Dislike of Bright Lights
Lethargy
Profoundness
Coma
Permanent Disability
Death

MANAGE THE MINUTES

Every Second Counts

A hospital stay resulting from meningitis can be traumatic and heartbreaking, with the possibility of great uncertainty to follow. It will test your patience and understanding, but remember – you can gain comfort, strength and knowledge.

There are people who can help you.

After Hospital

Most people will make a full recovery after meningitis, but it can take time.

A spell in hospital is upsetting for most people, and particularly for young children and their parents.

Young children frequently find the experience of being confined in hospital with meningitis unsettling and this often causes the child to be clingy, throw tantrums, sleep poorly or even revert to bed-wetting for a short period of time after being discharged from hospital. Consequently, children may need some extra help and encouragement with activities such as feeding, dressing and showering.

Can adults get meningitis?

Adults can also become infected with meningitis organisms. Like children, they often experience temporary after-effects which usually last from days to months.

Summary of possible after-effects of meningitis

- General tiredness
- Recurring headaches
- Difficulty in concentration
- Short-term memory lapses
- Clumsiness
- Giddiness

- Balance problems
- Depression
- Violent temper tantrums
- Bouts of aggression
- Mood swings
- Learning difficulties/reduced ability in some areas of school work *
- Deafness
- Tinnitus (i.e. ringing in ears)
- Joint soreness/stiffness
- Eyesight difficulties
- Epilepsy
- Brain damage

Any of these symptoms should be discussed with your doctor during follow-up medical consultations.

* It is important to talk to teachers about any problem a child may be experiencing.

The most serious complications

One of the most common complications is deafness, which affects around one in ten people, and can either be temporary or permanent.

Anyone who has had bacterial or viral meningitis should have a hearing test – this is especially important for young children where hearing loss is often more difficult to detect. Children's hearing tests are arranged through your GP or your local hospital's Ear, Nose and Throat Department.

During the illness, septicaemia (blood poisoning) can occur, and in extreme cases can result in a diminished blood supply to the feet, toes, hands and fingers. This may result in the need for skin grafts or even amputation.

What can be done to prevent other people getting it?

Meningitis is caused by many different bacteria and viruses. The germs that cause bacterial meningitis are very common and normally live in the back of the nose and throat. The germs can spread between people by coughing, sneezing and kissing but they cannot live for more than a few minutes outside of the body.

Close family contacts of the patient are at an increased risk of contracting the disease. With meningococcal meningitis and Hib infections, antibiotics and vaccines may be offered to these close contacts. They reduce, but cannot eliminate, the risk of family members also becoming ill.

Other contacts such as school friends and workmates are normally not at significant risk and do not need special treatment or investigation.

Be patient when recovering

As the list shows, some of the most common after-effects are not 'visible on the outside', but can nevertheless affect the patient's quality of life dramatically. For example, if a sufferer is left feeling tired, depressed and unable to concentrate, it may be weeks or even months before they are able to return to a normal routine.

So the more stress-free the recovery period is, the sooner the sufferer will improve. Patients shouldn't rush themselves, but rather listen to what their body is telling them and not attempt too much too soon.

Many sufferers have found success using 'complementary' medicines to deal with after-effects.