



Integrated Physician Solutions, Inc.



## Meningococcal disease can be deadly. Vaccination is the best protection.

Meningococcal disease (meningitis) occurs in cycles, affecting between 1800 and 3400 people in the United States (US) each year<sup>1</sup>; up to 1 in 5 of those infected will die.<sup>2,5</sup> For those who survive, meningococcal disease can have devastating, lasting effects, including brain damage, hearing loss, learning disability, loss of limbs, and kidney failure. Infection starts with influenza-like symptoms and can progress quickly, leading to permanent disability or death.<sup>6</sup>

College freshmen are at an increased risk of getting meningococcal disease.<sup>3,7</sup> Studies show that college freshmen living in dormitories have at least a 6-fold higher risk for meningococcal disease than all US undergraduates.<sup>3,7</sup> Drinking and smoking may increase their risk.<sup>6</sup> Meningococcal disease can be spread by coughing or sneezing, sharing drinking glasses or cigarettes, or kissing.<sup>6</sup>

Vaccination can reduce the risk of getting meningococcal disease. The Centers for Disease Control and Prevention (CDC) and other health organizations recommend that vaccination be considered for incoming college freshmen. These young people and their parents should be aware of the dangers of meningococcal disease and the benefits of vaccination.<sup>3,6,8</sup>



**References:** **1.** Centers for Disease Control and Prevention (CDC). Summary of notifiable diseases—United States, 2002. *MMWR Morb Mortal Wkly Rep.* 2004;51:1-84. **2.** Rosenstein NE, Perkins BA, Stephens DS, et al. The changing epidemiology of meningococcal disease in the United States, 1992-1996. *J Infect Dis.* 1999;180:1894-1901. **3.** CDC. Prevention and control of meningococcal disease and meningococcal disease and college students: recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR Morb Mortal Wkly Rep.* 2000;49(RR-7):1-20. **4.** Harrison LH, Pass MA, Mendelsohn AB, et al. Invasive meningococcal disease in adolescents and young adults. *JAMA.* 2001;286:694-699. **5.** Erickson L, De Wals P. Complications and sequelae of meningococcal disease in Quebec, Canada, 1990-1994. *Clin Infect Dis.* 1998;26:1159-1164. **6.** American College Health Association. Meningitis on campus: communications support. Available at: [http://www.acha.org/projects\\_programs/meningitis/disease\\_info.cfm#transmission](http://www.acha.org/projects_programs/meningitis/disease_info.cfm#transmission). Accessed June 24, 2004. **7.** Bruce MG, Rosenstein NE, Capparella JM, Shutt KA, Perkins BA, Collins M. Risk factors for meningococcal disease in college students. *JAMA.* 2001;286:688-693. **8.** American Academy of Pediatrics Committee on Infectious Diseases. Meningococcal disease prevention and control strategies for practice-based physicians (addendum: recommendations for college students). *Pediatrics.* 2000;106:1500-1504.