

# Meningitis and/or Septicaemia



Information for parents/carers

We realise how distressing it must be to have your child diagnosed with meningitis and/or septicaemia and are aware what a worrying time this is.

This leaflet will provide information about the care that your child will receive while in hospital and will hopefully answer a few questions you may have.

### What is meningitis?

It is the inflammation of the lining of the brain and spinal cord, (meninges) and is caused by different bacteria and viruses. This can cause damage to the nerves and brain if left untreated, or if there is any delay in diagnosis or treatment.

# What is septicaemia?

It is the poisoning of the blood caused by large amounts of bacteria entering the blood stream often from an infection elsewhere in the body.

## Why did my child get this?

Anyone, anywhere can contract meningitis or septicaemia, but those most at risk are very young children, those with other medical conditions, or those who have not had routine childhood vaccinations.

Some of the bacteria that cause meningitis and septicaemia live naturally in throats or noses of about 1 in 10 people. In a few people, however, the bacteria can overcome their immune defences and pass through the lining of the nose and throat into the bloodstream, thus causing infection. If the bugs move across to the lining of the brain, they can cause meningitis.

# How do we know that my child has meningitis and or septicaemia?

Babies, children and teenagers with meningitis and/or septicaemia may show various symptoms:

- high fever, with cold hands and feet
- drowsiness, and unresponsive
- an unusual high-pitched or moaning cry
- a tense, bulging soft spot on their head (fontanelle)
- convulsions or seizures
- vomiting
- confusion and irritability
- severe muscle pain
- pale, blotchy skin, and a distinctive rash (although not everyone will have this)
- a severe headache
- stiff neck
- sensitivity to light (photophobia)

Based on these symptoms and clinical examination, doctors may suspect the presence of infection. From this your child would then have had blood tests to identify the presence of serious infection and in some cases, a lumbar puncture will be necessary. A lumbar puncture (LP) is a medical procedure carried out to obtain a sample of cerebrospinal fluid which is the fluid that covers the brain and spinal cord. When an LP is carried out, a needle is inserted into the lower back to obtain the fluid, which can then be tested for infection to identify meningitis.

These results can take 48-72 hours to come back, but your child will commence treatment as soon as possible, before test results confirm or rule out a diagnosis of meningitis.

## How will my child be treated?

Your child will be admitted to the children's ward and treated with intravenous antibiotics to kill the bacteria. Your child's condition will regularly be monitored by the nursing and medical staff to identify any change in care needed.

Depending on the severity of the condition, he/she will have to remain in the hospital from a few days to two weeks.

# What are the possible complications?

Most children make an excellent recovery with treatment. But bacterial meningitis can put tremendous strain on both the body and the brain. Some children can develop complications; these can differ in severity from child to child and can be temporary or permanent. Short term complications can include fits, lack of consciousness, which can sometimes result in the need for assisted breathing.

Your child may need transferring to another hospital for further specialised care.

Long term problems include hearing loss, learning problems and epilepsy. If your child shows any signs of these they will be followed up and supported through them.

#### Prevention

Children are now routinely vaccinated against some strains of bacteria which can cause meningitis. These can have mild side-effects, which don't last long, and there have been no major problems identified with this vaccination.

#### **Feedback**

We want your visit to be as comfortable as possible. Please talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve your concern, please ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care. Before you leave the hospital you will be asked to complete a Friends and Family Test feedback card. Providing your feedback is vital in helping to transform NHS services and to support patient choice.

# **Trust Values**

#### Courtesv and respect

- A welcoming and positive attitude
- Polite, friendly and interested in people
- Value and respect people as individuals So people feel welcome

#### Attentively kind and helpful

- Look out for dignity, privacy & humanity
- Attentive, responsive & take time to help
- Visible presence of staff to provide care So people feel cared for

#### Responsive communication

- Listen to people & answer their questions
- Keep people clearly informed
- Involve people So people feel in control

#### Effective and professional

- Safe, knowledgeable and reassuring
- Effective care / services from joined up teams
- Organised and timely, looking to improve So people feel safe



The hospital can arrange for an interpreter or person to sign to assist you in **TRAN** communicating effectively with staff during your stay. Please let us know.

For a large print version of this leaflet, contact PALS 01493 453240

Author: Saskia Van Branteghem, Paediatric Nurse, Children's and Young Persons' Unit © January 2010 Revised December 2015, June 2019 James Paget University Hospitals NHS Foundation Trust Review Date: June 2022 CH 54 version 3