

Advice for parents

Meningitis is an infection of the protective membranes that surround the brain and spinal cord (meninges). It can affect anyone, but is most common in babies, young children, teenagers and young adults. Symptoms of meningitis, septicaemia and meningococcal disease are set out below the red amber and green boxes

When should you worry?

If your child has any of the following:

- Breathing very fast, too breathless to talk, eat or drink
- Working hard to breathe, drawing in of the muscles below the rib, or noisy breathing (grunting)
- Breathing that stops or pauses
- Is pale, blue, mottled or feels unusually cold to touch
- Difficult to wake up, very sleepy or confused
- Weak, high-pitched cry or can't be settled
- Has a fit (seizure)
- Has a rash that does not go away with pressure (see the 'Glass Test')
- Is under 3 months old with temperature more than 38°C or under 36°C (unless fever in the 48 hours following vaccinations and no other red features)



RED

Your child needs urgent help

please phone 999 or go to the nearest hospital emergency (A+E) department

If your child has any of the following:

- A severe headache and neck stiffness/pain
- Discomfort with bright lights (photophobia)
- Breathing a bit faster than normal or working a bit harder to breathe
- Dry skin, lips or tongue
- Not had a wee or wet nappy in last 8 hours
- Poor feeding babies (less than half of their usual amount)
- Irritable (unable to settle them with toys, TV, food or hugs even after their fever has come down)
- Is 3-6 months old with temperature 39°C or above (unless fever in the 48 hours following vaccinations and no other red or amber features)
- Temperature of 38°C or above for more than 5 days or shivering with fever (rigors)
- Temperature less than 36°C in those over 3 months)
- Getting worse or you are worried about them



AMBER

You need to contact a doctor or nurse today

Please ring your GP surgery or contact NHS 111 - dial 111 or for children aged 5 years and above visit 111.nhs.uk

If symptoms persist for 4 hours or more and you have not been able to speak to either a member of staff from your GP practice or to NHS 111 staff, recheck that your child has not developed any red features

If your child has none of the above:

- Watch them closely for any change and look out for any red or amber symptoms
- If your child has any other symptoms associated with their fever, you may want to look at the information on sore throat, cough, earache, diarrhoea and vomiting or tummy ache or our other pathways.
- Additional advice is also available for families for help cope with crying in otherwise well babies
- If your child has a long term condition or disability and you are worried please contact your regular team or follow any plans that they have given you.



Self care

Continue providing your child's care at home. If you are still concerned about your child, call NHS 111 – dial 111

Symptoms of meningitis, septicaemia and meningococcal disease include:

- headache
- a stiff neck
- a dislike of bright lights
- a high temperature
- cold hands and feet
- vomiting
- confusion
- breathing quickly
- muscle and joint pain
- pale, mottled or blotchy skin
- spots or a rash
- being very sleepy or difficult to wake
- fits (seizures)

There are two types of meningitis:

- Bacterial - a serious infection that requires urgent treatment with antibiotics. Can result in long term complications.
- Viral - generally a less serious infection which doesn't often result in long term complications. Does not need treatment with antibiotics.
- Unfortunately, without tests, it can be extremely difficult to distinguish the two.
- However, following the introduction over the past few years of routine vaccinations for babies against infections such as meningococcus, pneumococcus and haemophilus, the rates of bacterial meningitis in children have more than halved. As a result, the number of children affected each year by bacterial meningitis in the UK is now less than 1 in 10,000.

What should you do?

- Only a tiny proportion of children who have a fever and are miserable have bacterial meningitis. Look closely at the symptoms in the red and amber box above.
- Children should be assessed by a medical professional if you are worried.
- If your child seems unsettled or uncomfortable, you may wish to give your child paracetamol or ibuprofen.
- It can take 30 minutes for your child's temperature to start to fall and for your child to start to feel better after taking paracetamol or ibuprofen.
- If you have given your child one of these medicines and they are still uncomfortable 2 hours later you could try the other medicine.

Paracetamol

- There are different types of paracetamol for children of different ages including 2 different strengths of syrup - infant and Six plus. Always read the dose instructions carefully. You must wait at least 4 hours between doses. Do not give more than 4 doses in 24 hours.

Ibuprofen

- Ibuprofen is available in syrup and tablet form. Ibuprofen is not suitable for some children. If you are unsure whether your child can take ibuprofen, check with your pharmacist or doctor. Always read the dose instructions carefully. Don't give ibuprofen if your child has not had a wee in the last 12 hours. You must wait at least 6 hours between doses. Do not give more than 3 doses in 24 hours.
- It can be normal for the temperature to go back up when the medicine wears off.
- Avoid tepid sponging your child. It doesn't actually reduce your child's temperature and may cause your child to shiver.
- Encourage them to drink plenty of fluids.
- However, remember that fever is a normal response that may help the body to fight infection and paracetamol/ibuprofen will not get rid of it entirely.
- If a rash appears, do the glass test.