

b Meningococcal disease

In South Africa, meningococcal disease is endemic and cases occur year-round, but with seasonal peaks in winter and early spring. In addition, there is a natural cyclical pattern of meningococcal disease with peaks of disease occurring every 5 to 10 years. Current rates of meningococcal disease in South Africa are at a nadir and we are expecting an increase in rates based on known periodicity.

Cases of meningococcal disease continue to be reported from across the country. There are inherent delays in laboratory-based reporting, which lags behind clinical reports; in addition, because our laboratory-based surveillance system excludes disease diagnosed clinically without laboratory confirmation, reported rates represent a minimum estimate of the true burden of disease.

By the end of epidemiological week 39 (week ending 30 September 2014), a total of 126 laboratory-confirmed cases was reported to the Centre for Respiratory Diseases and Meningitis (CRDM), NICD-NHLS (Table 2). The highest burden of disease is among the <1 year age group, where 21 (17%) cases have been reported so far. This is

lower than the number of cases reported for the equivalent time period and age group in 2013 (n=36, 21%).

The reported cases were caused by diverse serogroups, which is in keeping with sporadic endemic disease in the country. Serogroup data were available for 78/126 (62%) of cases. Serogroups B, W* and Y have been identified most commonly this year (23/78, 29% serogroup B; 28/78, 36% serogroup W* and 15/78, 19% serogroup Y). There were also 11 cases of serogroup C and 1 case of serogroup X disease.

Clinicians should have a high index of suspicion for meningococcal disease in patients who present with an acute febrile illness and nonspecific early signs and symptoms. Disease typically has a rapid progression and should be managed as a medical emergency in order to reduce morbidity and mortality. All cases of suspected and/or confirmed meningococcal disease (meningitis and sepsis) should be notified telephonically to the Department of Health.

Table 2. Number of laboratory-confirmed meningococcal disease cases reported until end of week 39, 2013 and 2014, by province

Province	Year	
	2013	2014
Eastern Cape	32	27
Free State	11	4
Gauteng	48	40
KwaZulu-Natal	30	12
Limpopo	1	0
Mpumalanga	3	1
Northern Cape	2	0
North West	5	1
Western Cape	37	41
	169	126

*Previously known as serogroup W135. Harrison OB, EID 2013: 19(4) 566-573

Source: Centre for Respiratory Diseases and Meningitis, NICD-NHLS