

Bacterial Meningitis

Pathogens by age group:

- Neonates (highest incidence) = Group B strep (*S. agalactiae*)
- 1-23 months = *Streptococcus pneumoniae*, *Neisseria meningitidis*; group B strep
- 2-5 years = *Haemophilus influenzae* type b
- 2-18 years = *N. meningitidis*, *S. pneumoniae*
- 18-60 years = *S. pneumoniae*, *N. meningitidis*
- >60 years = *S. pneumoniae*, *L. monocytogenes*

Diagnosis

Clinical Features – Fever, Headache (severe, generalized), photophobia, nuchal rigidity
Changes in mentation, seizures, focal neurologic signs are later in disease.

Brudzinski sign – spontaneous flexion of the hips when neck is passively flexed

Kernig sign – inability to allow full extension of the knee when the hip is flexed 90°

CSF	Glucose		Protein		Total WBC	
	<10	10-45	>500	50-500	>1000	5-1000
More Common	Bacterial Meningitis	Bacterial Meningitis	Bacterial Meningitis	Viral Meningitis	Bacterial Meningitis	Early Bacterial Meningitis
				Syphillis		Viral Meningitis
Less Common	Tuberculous Meningitis	Syphillis	Tuberculous Meningitis			Encephalitis
	Fungal Meningitis	Some Viral Meningitis				

Therapy

Immunocompetent adults < 50 years old

Pathogens: *S. pneumoniae* and *N. meningitidis*

Empiric Tx: a 3rd generation cephalosporin (**Ceftriaxone or Cefotaxime**)

Immunocompetent adults > 50 years old

Pathogens: *Listeria monocytogenes* and group B streptococcus (GBS)

Empiric Tx: **Ampicillin + 3rd generation cephalosporin**

If >3% resistance of *S. pneumoniae* to cephalosporin, then add **Vancomycin**

Immunocompromised: **Ampicillin + Ceftazidime** (Gram negative + pseudomonas)

Indwelling CSF shunt, recent head trauma/surgery: **Ceftazidime + Vancomycin**

Results of Gram Stain:

Gram + cocci (*S. pneumoniae*) – **Vancomycin + Ceftriaxone or Cefotaxime** (2 weeks)

Gram – cocci (*N. meningitidis*) – Penillin G (5 days)

Gram + bacilli (*Listeria*) – **Ampicillin + aminoglycoside** (3-6 weeks)

Gram – bacilli (*Klebsiella, E. Coli*) – **Ceftriaxone + aminoglycoside** (3 weeks)

H. influenza – **Cefotaxime or Ceftriaxone** (5-7 days)

Adjunctive therapy – dexamethasone (0.15 mg/kg Q6h for four days) can be considered in patients with two of three (hypotension, seizures, reduced level of consciousness); controversial treatment, no good data.