

Pneumococcal Disease

Fact Sheet

What is Pneumococcal Disease?

Pneumococcal disease is caused by infection with *Streptococcus pneumoniae*. Infection can cause a variety of disease including pneumonia (lung infection), otitis media (infection of the middle ear) and meningitis (infection of the membranes around the brain and spinal cord).

What are the symptoms?

Symptoms depend on the site of infection and the age of the person.

Pneumonia can cause shortness of breath, fever, lack of energy, loss of appetite headache, chest pain and cough.

Otitis media can cause crying, tugging at the ear, fever, irritability, poor hearing and sometimes diarrhoea and vomiting.

Meningitis can cause fever, headache, neck stiffness, nausea, vomiting and drowsiness.

Who is at risk from Pneumococcal Meningitis?

Pneumococcal disease can affect anyone, but those most at risk include:

- Children under the age of 2 years old.
 - People who have a poor immune system.
 - People who have had their spleen removed (splenectomy) or whose spleen does not work properly.
 - The elderly.
 - Aboriginal and Torres Strait Islander people.
 - People who have lung disease, heart disease, cancer, kidney disease, HIV infection or malnutrition
 - People who smoke.
 - People with cochlear implants.
- Pneumococcal infections occur more commonly in winter and early spring. Outbreak have been linked to childcare centres, nursing homes and other institutions

How can Pneumococcal Disease be spread?

The pneumococcal bacteria are transferred from one person to another via contact with respiratory secretions from the nose or throat of an affected person. Regular and thorough hand hygiene is one of the most successful ways to prevent the spread of ALL infections. Good respiratory hygiene practices such as covering the nose and mouth when sneezing / coughing and disposing of used tissues immediately after blowing your nose also reduces the spread of infection.

How will my care change whilst in hospital?

Because the symptoms of pneumococcal disease are similar to meningococcal disease you may initially be cared for using special infection control measures as outlined below:

- A sign is placed outside your door to alert hospital staff for the need to use special protective infection control precautions. This sign also alerts visitors of the need to speak with nursing staff prior to entering your room.
- During the infectious period hospital staff will wear protective apparel such as gloves, a mask, goggles and an apron or gown when they enter your room. Your visitors will also be asked to wear these items.
- You will be allocated a private room with your own ensuite facilities. Your movement throughout the hospital will be limited to essential movement only and you will be required to put on a mask prior to leaving the room.

Pneumococcal Disease

Fact Sheet

Once the cause of your illness is identified as pneumococcal (up to 24 hours) these precautions will be ceased.

Good Hand Hygiene Practices

Hand Hygiene is the most effective way to prevent ALL infections, including the flu and the common cold. Encourage your family and friends to learn and maintain good hand hygiene practices every day.

Please refer to the hand hygiene information in the patient information booklet or hand hygiene leaflet available from the Infection prevention and control team.

During your stay in hospital, you may have seen the staff using an alcohol-based hand rub, as an alternative to soap and water. Alcohol-based hand rubs or gels can be used for hand hygiene as long as your hands are not visibly soiled / dirty. There are a variety of brands on the market and are available for purchase at most pharmacies. You may choose to use this type of product at home.

Can I still have visitors?

Yes. However, while waiting for the cause of your meningitis to be identified (up to 24 hours) we recommend that you restrict the number of visitors you must as few as possible. **People that should not visit you include children, pregnant women, and immune-compromised people.**

Initially your visitors may be asked to wear protective equipment such as gloves, mask, goggles and an apron or gown. The nursing staff will assist your visitors with this as well as instruct your visitors on the importance of strict hand hygiene before and after they enter your room. We ask that you also encourage your visitors to do this. They can use either; soap and water at the wall sink in the ward, or the alcohol hand rub provided outside your room.

What happens when I go home?

- When you return home, it is important for you, your family, and your friends to continue the good hand hygiene practices that you have been taught in hospital every day.
- It is important that anyone assisting you with close personal care wears gloves if they are going to be in contact with any wounds, blood, urine, or faeces. They must wash their hands well, after removing their gloves and disposing of the gloves immediately in the rubbish bin.
- You should always maintain good respiratory hygiene practices to prevent the spread of any respiratory infection. Always cover your nose and mouth to sneeze and cough and dispose of used tissues immediately in the rubbish. After sneezing, blowing your nose or coughing wash your hands.

Where can I get further information?

Talk to your doctor or the nurses caring for you. If you wish to speak with the Infection Control department, ask your nurse to contact us. Our office hours are 8am to 4pm Monday to Friday. Our contact numbers are:

- Office: (02) 9480 9433
- Office: (02) 9480 9732

Alternatively contact your Local Public Health Unit 1300 066 055.

Pneumococcal Disease

Fact Sheet

References

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