



Public Health
England



BPSU Surveillance of Enterovirus and Parechovirus Meningitis in infants < 90 days of age Commences in July 2014

Approximately 85% of childhood meningitis in the conjugate vaccine era is due to enteroviruses and Human Parechoviruses (HPeV). Young infants are particularly susceptible to enterovirus and HPeV meningitis and often present with non-specific symptoms which are difficult to differentiate from serious bacterial infections. Real-time PCR is becoming increasingly available and it is anticipated that more cases will be diagnosed in the coming years.

There is, however very limited data assessing the incidence, clinical features, sequale and outcome of infants with meningitis as a result of these viruses. This study will aim to improve our understanding of enterovirus and parechovirus meningitis, and also the outcomes. Furthermore, there is no data linking the molecular subtypes of enteroviruses and HPeV currently circulating in the UK and Ireland with clinical severity, laboratory markers or outcomes. No specific antiviral treatments are licenced or in the immediate pipeline to treat these important viruses. In part the lack of good clinical data defining the burden of disease is a barrier to the development of novel antiviral therapy.

Duration: BPSU surveillance will be undertaken for 13 months, commencing 01 July 2014.

Case definition: Any case where the clinician has made a clinical diagnosis of enterovirus or parechovirus meningitis in infants less than 90 days of age.

Reporting Instructions: Please report any infant seen in the last month who meets the case definition. Please report to the BPSU even if you believe the case may have been reported from elsewhere. Please note that the BPSU surveillance does not replace other ongoing systems for notification of infant death, in particular the Child Death Review System.

Website: www.rcpch.ac.uk/bpsu/neoentero

Funding: Paediatric Infectious Diseases Research Group, St George's University of London

Ethical approval: This study has been approved by the NRES Committee London - Queen Square (Ref: 14/LO/0229). Public Health England has approval under Section 251 of the NHS Act 2006 to process confidential patient information for public health purposes. See [The Health Service \(Control of Patient Information\) Regulations 2002](#).

Further information:

If you would like any advice regarding the eligibility of a particular case for inclusion in the study please contact:

Dr Shamez Ladhani, Immunisation, Hepatitis and Blood Safety Department, Public Health England, 61 Colindale Avenue, London NW9 5EQ
Tel: 020 8327 7155 Email: shamez.ladhani@phe.gov.uk