

ADVICE FOR FIRST YEAR UNIVERSITY STUDENTS ON VACCINE-PREVENTABLE INFECTIONS

Meningitis C

Meningococcal infection is a serious illness caused by a bacterium known as meningococcus. There are several different groups of meningococci. Before vaccination against group C meningococcal infection was introduced in 1999/2000, there were a number of outbreaks of meningitis at universities in the UK. Since then, group C meningococcal infection has become very rare. There is as yet no vaccination for the most common group of meningococci in the UK (group B) and cases of group B meningococcal infection still occur.

Students are advised to ensure that they have been vaccinated against meningitis C before arriving in Cambridge. If this is not possible, please discuss this with your doctor or college nurse as soon as possible after your arrival.

Mumps

Mumps can be a serious infection if caught after puberty. The number of cases of mumps reported nationally has increased in recent years. There have been a number of outbreaks affecting secondary schools, universities and colleges, and military establishments. The University of Cambridge was itself affected by a large outbreak of mumps during October – December 2004.

People born in the UK between 1982 and 1990 are especially susceptible. They were born before the MMR (Measles, Mumps and Rubella) vaccine was in general use but grew up at a time when vaccination reduced the chances of them being exposed to mumps. Many people now in their teens and twenties have either not been immunised at all or have had only one dose of MMR. The school vaccination programme in 1994 only covered measles and rubella.

National policy is that children and young adults (up to and including 24 yrs) should be protected with two doses of MMR. We strongly recommend that all students ensure that they have had two doses of the MMR vaccine before coming to university.

Tuberculosis (TB)

TB is a serious but curable disease. Like most countries worldwide, the UK has been seeing an increase in TB that is highest in London and the other major cities where the risk factors tend to be concentrated. The TB rate is much higher in the foreign-born population than in the UK-born, the rate being also higher in certain ethnic groups in the first few years after they enter the country. In the UK, those at most risk of developing TB disease include people who are close contacts of a person with infectious TB and those who have visited, lived or worked for a long time in countries with a high rate of TB.

The BCG vaccination provides good protection against TB infection. In September 2005, the UK schools BCG programme was replaced with a targeted programme aimed at those most likely to catch the disease, especially those living in areas with a high rate of TB or new entrants to the UK from countries with a high rate of TB. Countries that have high rates of TB over 40/100,000 of the population are listed at http://www.hpa.org.uk/infections/topics_az/tb/epidemiology/who_table1.htm.

If you have not already been vaccinated and think you are at risk from TB, you should discuss this with your doctor or college nurse. If vaccination is required, you will be referred to the chest clinic at the hospital as this vaccine is not given in general practice.

Diagnosis of infection in young people can be delayed because often neither they nor their doctor consider it as a possibility. If you develop symptoms, such as a persistent cough that lasts for three weeks or more; appetite and weight loss; and fever and sweating at night, you should see your doctor.