

Source URL (retrieved on 19/06/2013 - 10:40pm):

<http://www.healthier.qld.gov.au/conditions-treatments/haemophilus-influenza-type-b-0>

Haemophilus Influenza type b

Category: [Infections and Parasites](#) [1]

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Haemophilus Influenza type b (Hib) is an infection caused by the *Haemophilus Influenzae* type b bacteria which can cause meningitis (infection of the covering of the brain and spinal cord), epiglottitis (internal swelling in the throat which can obstruct breathing), or pneumonia (lung infection). Both meningitis and epiglottitis can develop quickly and, if left untreated, can rapidly cause death. Despite its name, it is not related to influenza ("the flu"). Before the introduction of routine Hib vaccination in 1993, Hib was the most frequent cause of life threatening bacterial infection in children under the age of five years.

Signs and Symptoms:

Symptoms in adults and older children may include fever, loss of appetite, vomiting, lethargy, stiff neck and back. In infants, symptoms may include fever, loss of appetite, vomiting, lethargy and bulging fontanelle (soft spot on the head). Younger children and infants may also have a high-pitched cry. If you suspect these symptoms, seek medical assistance immediately.

Duration of the illness depends on early identification and commencement of effective treatment.

Hib disease is spread mainly through contact with droplets (ie. sneezing) and discharges from the nose and throat during the infectious period.

The usual time between contact with the bacteria and the development of the illness is short, approximately two to four days.

The person with Hib is infectious for as long as the bacteria is present in the nose or throat. They require 24 to 48 hours of appropriate antibiotic treatment before they are no longer infectious.

Treatment:

A person with Hib is usually admitted to hospital and treated with appropriate antibiotics.

Prevention:

People with Hib should not attend child care or school until they have completed a course of appropriate antibiotics.

In certain circumstances, the household and/or unvaccinated childcare contacts of the person with Hib will be given a course of antibiotics. Contacts taking antibiotics may continue to attend childcare, school or work.

Hib disease can be prevented by vaccination. The Hib vaccine is recommended for all children at two, four and 12 months of age. The Hib vaccine may be combined with other childhood vaccines (ie. Hib-hepatitis B). Hib vaccine is also recommended for people who have had their spleen removed.

Health Outcome:

Since Hib vaccine was included in the routine vaccination schedule in 1993, there has been a reduction of greater than 90% in reported cases of Hib disease. However, Hib infections such as

epiglottitis and meningitis are potentially very serious and can be fatal in very young children.

Other resources:**Footnotes**

Heymann, D., ed. 2004. *Control of Communicable Diseases Manual*, 18th edition. Washington, DC: American Public Health Association, pp 366-368.

National Health and Medical Research Council, 2003. [The Australian Immunisation Handbook \(9th Ed.\)](#) [3] Canberra: National Capital Printing.

Related Content

[Haemophilus Influenza B and immunisation fact sheet](#) [4]

Help and Assistance:

For further information, please contact your local doctor, community health centre or nearest public health unit.

Links:

[1] <http://www.healthier.qld.gov.au/category/topic/infections-and-parasites>

[2] <http://www.healthier.qld.gov.au/category/category/bacterial-infections>

[3] <http://www.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook-home>

[4]

<http://www.healthier.qld.gov.au/conditions-treatments/prevention/haemophilus-influenzae-type-b-and-immunisation>