Invasive Meningococcal Disease Monthly Report December 2024

This report summarises invasive meningococcal disease notifications and trends nationally from 1 January to 31 December 2024. Information is based on data recorded in EpiSurv and at ESR's Meningococcal Reference Laboratory as at 15 January 2025. Data presented may be further updated and should be regarded as provisional.

Summary

Between 1 January and 31 December 2024:

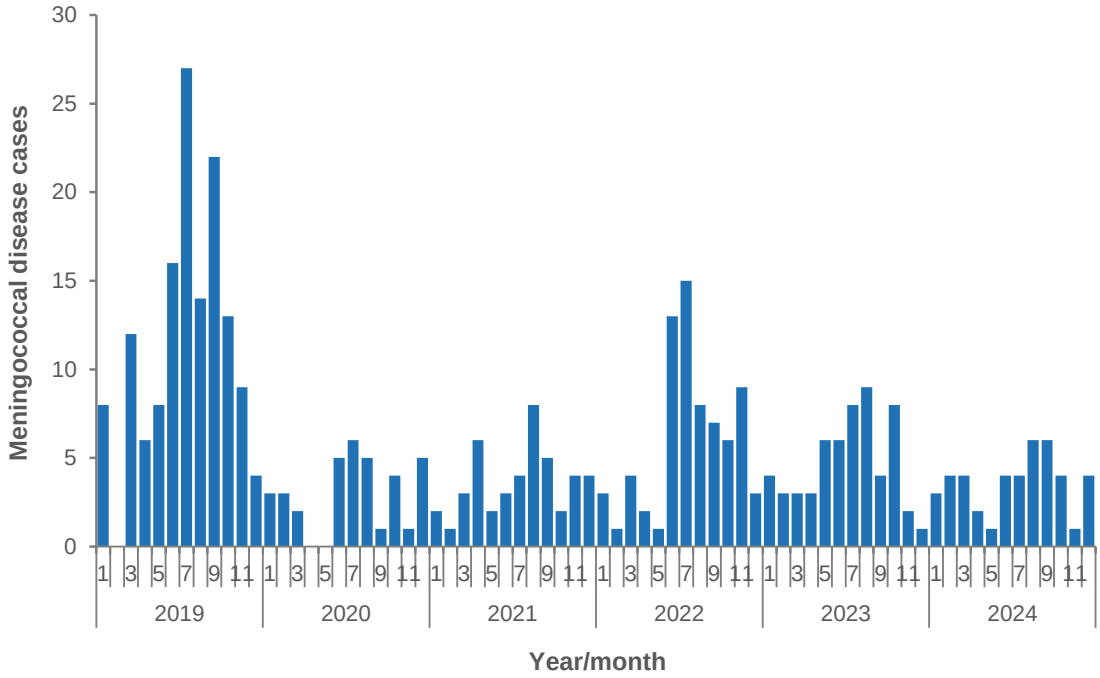
- there were 43 cases (40 confirmed and 3 probable) of invasive meningococcal disease reported. This number is similar to the same period in 2021, higher than in 2020 and lower than in 2019, 2022 and 2023;
- there were two deaths, one in an infant aged less than 1 year and one in a young adult aged 15–19 years;
- group B was the dominant group type. The group was identified for 35 cases: 26 (74%) were group B, five (14%) were group Y and four (11%) were group W;
- the Northern region reported the highest number of cases (17 cases), followed by Te Manawa Taki (11 cases).

National trends

There were 43 cases (40 confirmed and 3 probable) of meningococcal disease reported in 2024. There were two deaths, one in an infant aged less than 1 year and one in a young adult aged 15–19 years, both due to group B, PorA type P1.22,14.

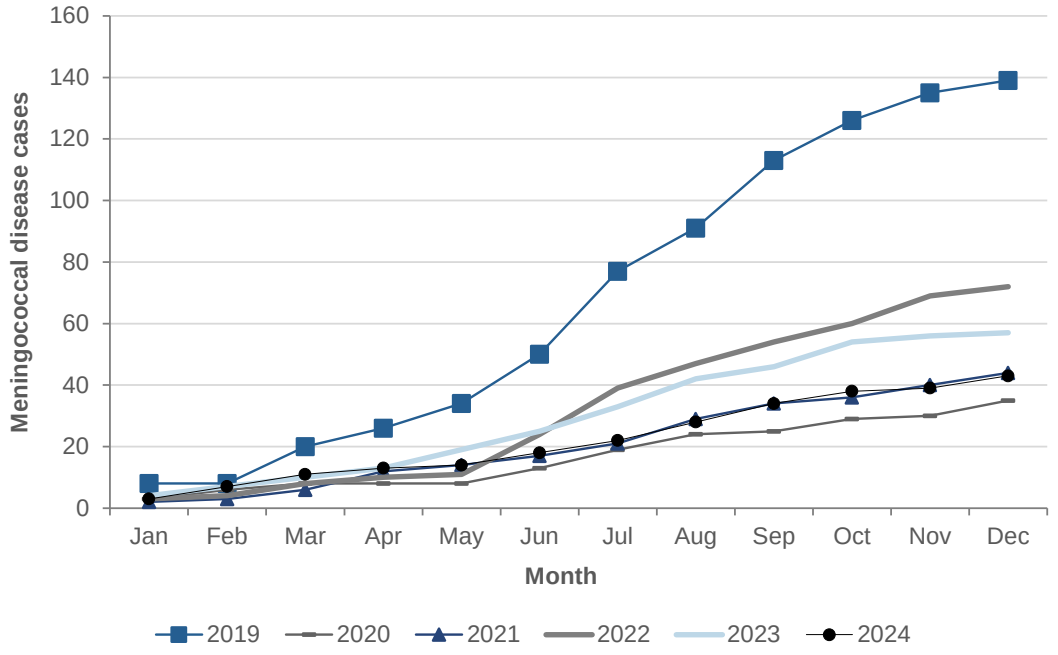
Although meningococcal disease follows a seasonal pattern with case numbers peaking in winter and continuing into spring in New Zealand, this pattern was not evident in 2024 (Figure 1).

Figure 1. Number of meningococcal disease cases by month and year, January 2019 to December 2024



The total number of cases in 2024 was similar to 2021, higher than in 2020, and lower than in 2019, 2022 and 2023 (Figure 2).

Figure 2. Cumulative number of meningococcal disease cases by month, January 2019 to December 2024

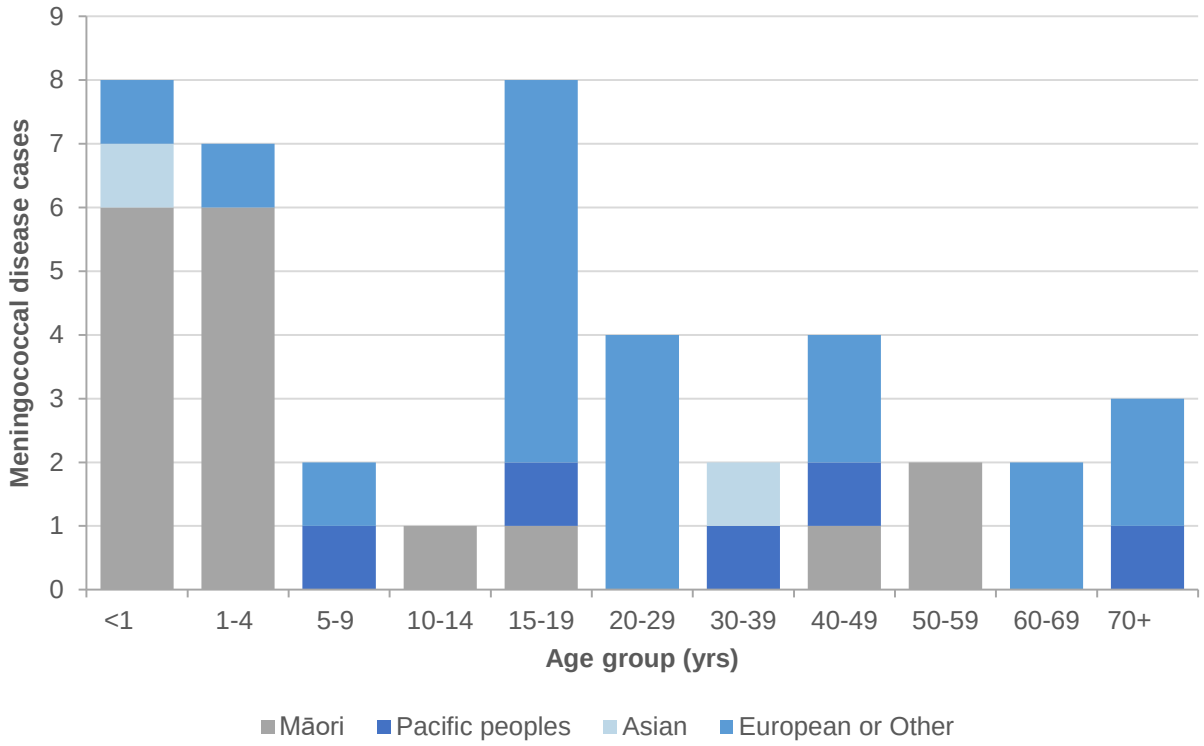


Meningococcal disease by ethnic group and age group

The majority of meningococcal disease cases in 2024 were European or Other ethnicity (44%, 19 cases) and Māori (40%, 17 cases).

For cases aged less than 5 years, the majority (80%, 12/15) were Māori, while for those aged 15–29 years, the majority (83%, 10/12) were European or Other ethnicity (Figure 3).

Figure 3. Number of meningococcal disease cases by prioritised ethnicity and age group, 1 January to 31 December 2024

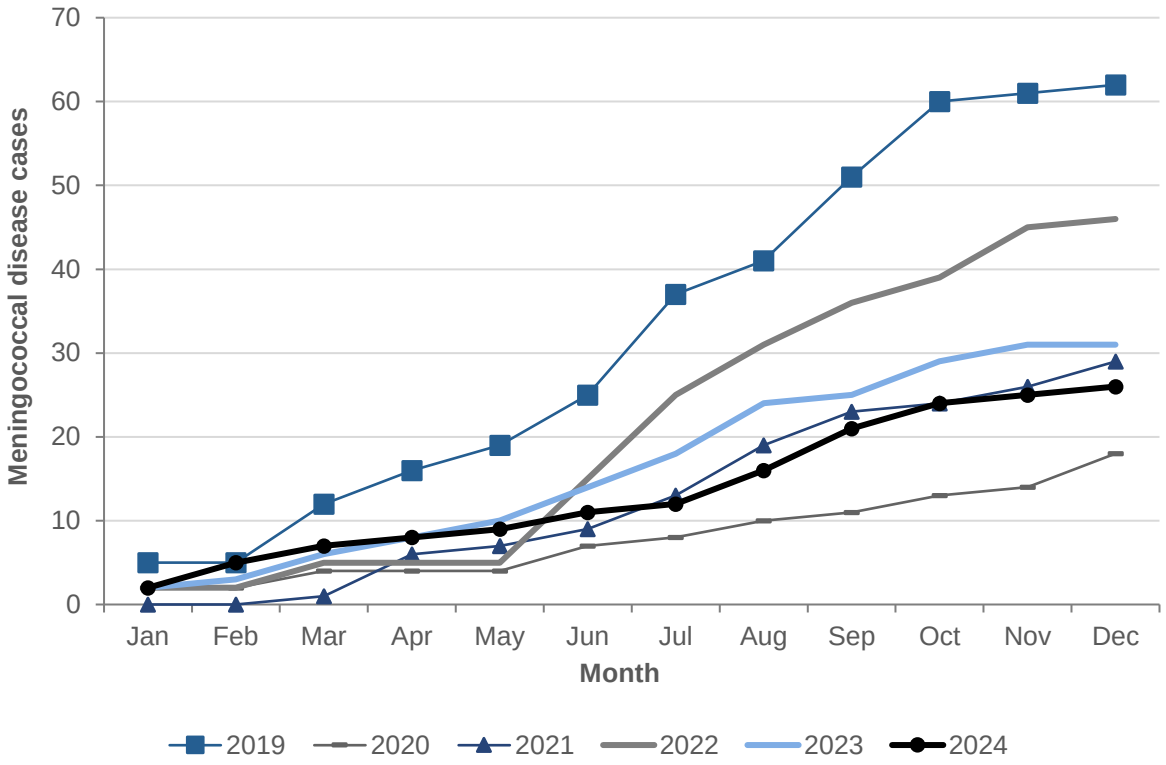


Meningococcal disease by group

The group was identified in 35 (88%) of the 40 confirmed cases in 2024. Group B was the dominant group type accounting for 26 (74%) cases, five (14%) were group Y and four (11%) were group W.

For group B cases, the number of cases in 2024 was lower than in 2019, 2021, 2022 and 2023 (Figure 4).

Figure 4. Cumulative number of group B meningococcal disease cases by month, January 2019 to December 2024



The number of cases due to group Y in 2024 (5 cases) was similar to 2023 (6 cases), higher than in 2020 (2 cases) and 2021 (1 case), and lower than in 2019 (16 cases) and 2022 (8 cases).

The number of group W cases in 2024 (4 cases) was lower than in 2019, 2020 and 2021 (36,11 and 6 cases, respectively) and similar to 2022 and 2023.

There were no group C or group E cases in 2024. The previous group C cases were in 2023, and the previous group E was in 2019.

Group B and vaccination status

Vaccination against meningococcal group B (Bexsero) was added to the National Immunisation Schedule on 1 March 2023, with a two dose primary series at ages 3 and 5 months and a booster at 12 months. All children aged less than 5 years are eligible for vaccination as part of a catch-up campaign until 31 August 2025.

In 2024, there were 12 cases due to group B in children aged less than 5 years. Of the 12 cases, one case aged 1-4 years had received the two dose primary series but no booster dose, two cases had received one dose, and nine cases were not vaccinated prior to the onset of illness.

Meningococcal disease by district and group

Meningococcal disease cases in 2024 were geographically dispersed throughout the country (Table 1). The highest number of cases was reported from the Northern region (17 cases), followed by Te Manawa Taki (11 cases).

Table 1. Number of meningococcal disease cases by group and district, 1 January to 31 December 2024

District / Region	Group			Group unknown[1]	Not lab-confirmed[2]	Total
	B	W	Y			
Northern	**13**	**2**	**1**	**1**	**0**	**17**
Northland	3	0	0	0	0	3
Waitemata	1	1	0	0	0	2
Auckland	4	0	1	0	0	5
Counties Manukau	5	1	0	1	0	7
Te Manawa Taki	**7**	**0**	**2**	**2**	**0**	**11**
Waikato	3	0	1	0	0	4
Lakes	1	0	0	2	0	3
Bay of Plenty	0	0	1	0	0	1
Tairāwhiti	0	0	0	0	0	0
Taranaki	3	0	0	0	0	3
Central	**4**	**0**	**1**	**2**	**0**	**7**
Hawke's Bay	1	0	0	0	0	1
Whanganui	1	0	0	0	0	1
MidCentral	1	0	0	0	0	1
Hutt Valley	1	0	1	1	0	3
Capital & Coast	0	0	0	0	0	0
Wairarapa	0	0	0	1	0	1
Te Waipounamu	**2**	**2**	**1**	**0**	**3**	**8**
Nelson Marlborough	0	0	0	0	0	0
West Coast	0	1	0	0	0	1
Canterbury	2	1	0	0	2	5
South Canterbury	0	0	0	0	0	0
Southern	0	0	1	0	1	2
Total	**26**	**4**	**5**	**5**	**3**	**43**

[1] Includes non-groupable and confirmed cases where a sample was not received by ESR
[2] Probable cases

Group B PorA type trends

Table 2 shows the trends in selected group B PorA types since 2019. The PorA types included in the table are those detected in 2024 as well as those that were most common in previous years.

Nine different PorA types have been identified among group B cases in 2024, and these were geographically dispersed. The PorA was not detected for one case.

The most common PorA type in 2024 was B:P1.7-12,14, followed by B:P1.22,14 and B:P1.7-2,4.

The B:P1.7-12,14 strain was first detected in New Zealand in 2009 and, while rare internationally, has risen steadily to become a common group B strain.

Table 2. Number of group B meningococcal disease cases by selected PorA type, 2019 to 2024

PorA type[1]	Year					
	2019	2020	2021	2022	2023	2024
P1.7-12,14	14	3	12	14	11	10
P1.22,14	5	0	2	2	4	5
P1.7-2,4	19	9	8	14	8	4
P1.7-12,14-80	0	0	0	0	0	1
P1.22-21,14	0	0	0	0	0	1
P1.18-1,3	2	0	0	1	0	1
P1.7-2,16-53	0	0	0	0	0	1
P1.20,23-3	0	0	0	0	0	1
P1.19-1,15	0	0	0	1	2	0
P1.22,14-49	0	0	0	0	2	0
P1.7,16-26	4	0	1	2	1	1
P1.19,15	1	1	1	0	1	0
P1.7,4-46	0	0	0	0	1	0
P1.18-1,30-8	0	0	0	0	1	0
P1.7-36,14	0	2	0	2	0	0
P1.18-1,34	3	0	0	2	0	0
P1.5,2	0	0	1	1	0	0
P1.7-13,14	1	0	0	1	0	0
P1.17,16-3	0	1	1	0	0	0
P1.7,16-53	2	0	1	0	0	0
P1.5-2,10-1	1	0	1	0	0	0
P1.22,9	1	0	1	0	0	0

[1] Does not include cases where the PorA was not detected