

Pneumococcal pneumonia

Pneumococcus, otherwise known as strep pneumoniae, is a very common bacterial pathogen. Many children in nursery school will have it in their nostrils and not be sick at all. However, in the setting of viral infections such as influenza, which disrupt the mucosal barrier, pneumococcus can sometimes proliferate and become pathogenic. It is a cause of bacterial ear infections, sinusitis, bronchopneumonia and blood stream infections (sepsis). People with sickle cell disease, weakened immune systems and those who have had a splenectomy are especially susceptible to severe forms of the disease.

Prevnar, a conjugated vaccine against pneumococcus helps defend infants against severe forms of the disease. Even though they will encounter the germ, they will not develop a high fever. The vaccine induces antibodies against 7 strains of pneumococcus. Although it doesn't protect against all strains, since the vaccine was released in the late 1990's, hospitalizations for invasive disease have decreased dramatically.

Case History of Pneumococcus

A healthy 5 month old boy, one of twins, was running a 103 fever after several days of a cold. He was acting inexplicably whiny and sicker while his twin sister was getting better. He had neither ear infection, nor deep cough but was admitted to the New York Hospital for tests for a possible kidney or unusual infection like Lyme disease. The medical residents thought the baby was not "that sick"; probably had a virus, and that the mother was over-reacting. Then his blood culture became positive for pneumococcus. He rapidly responded to antibiotics. If this had been in the days before antibiotics, with a pneumococcal blood stream infection, the baby would probably have gone on to develop meningitis, septic shock and die within a day or two. Prior to the development of antibiotics, every family knew someone who had lost an infant or young child to pneumonia or 'flu'. In many cases, pneumococcus was probably the culprit.