



Systematic Literature Review on the Burden and Economic Impact of Invasive Meningococcal Disease in Adolescents and Young Adults in France, Italy, Spain, and Germany



IMD causes a high burden with severe complications and high costs among European adolescents and young adults, underscoring the importance of prevention.



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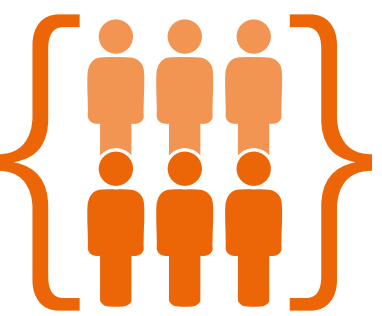
Background and aims

- Invasive meningococcal disease (IMD) is a serious and unpredictable disease that can cause severe complications, long-term sequelae, and even death.¹
- Although IMD is most common in infants, a second incidence peak occurs in adolescents and young adults, contributing to a substantial health and economic burden.²
- We assessed the epidemiology, disease burden, and economic burden of IMD in France, Italy, Spain, and Germany, in this systematic literature review, with a focus on adolescents and young adults (10–24-year-olds).

Study design



Searches in March 2025 included peer-reviewed literature from MEDLINE and Embase (past 10 years), conference proceedings (past 3 years), and relevant websites and governmental/non-governmental organisations.



Outcomes included **epidemiology, disease burden**, as well as **acute and long-term healthcare resource utilisation and costs**.

Results

Figure 1: Country-level serogroup data.

⇒ MenB was predominant in all 4 countries in the most recent years.³

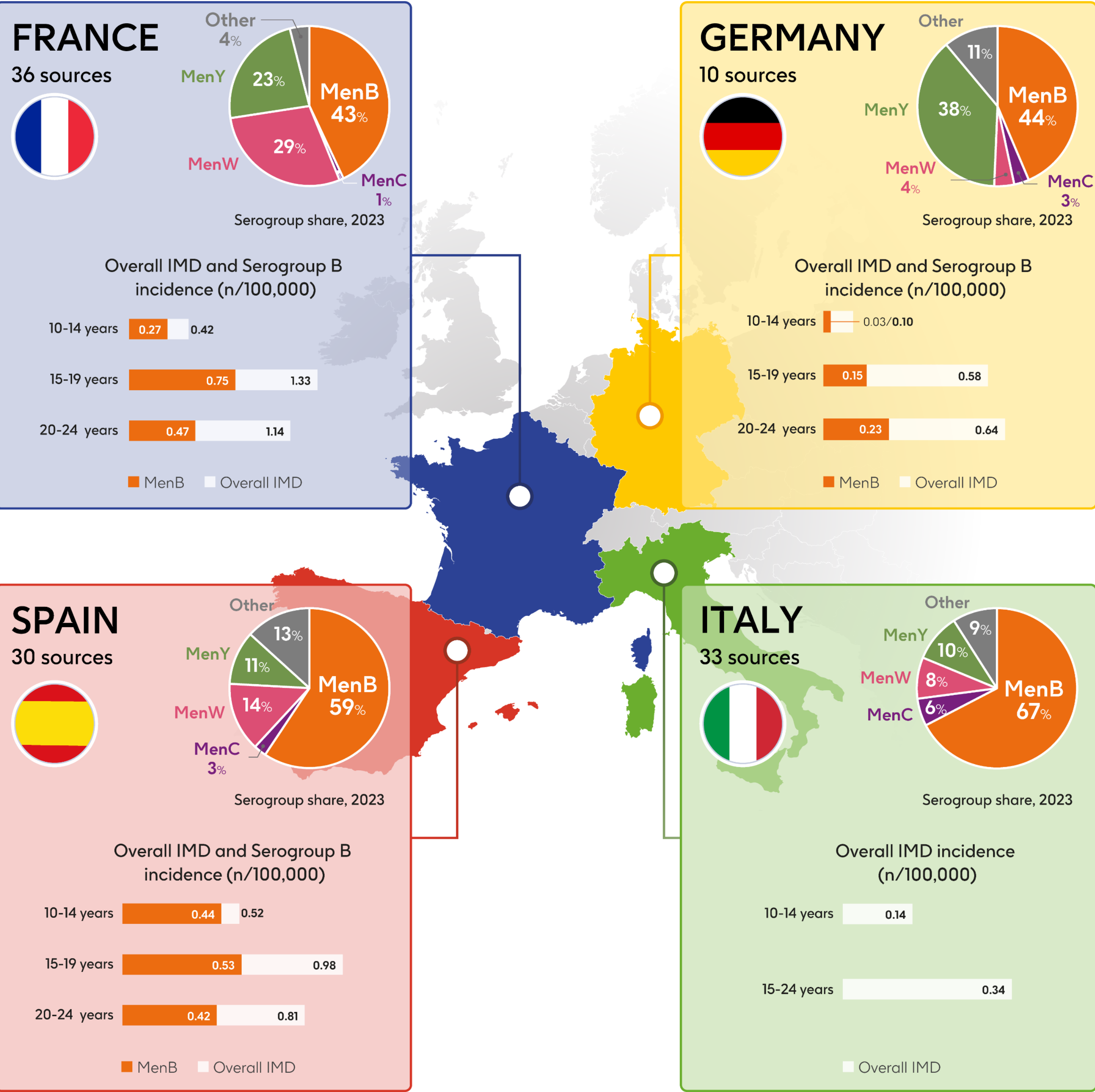
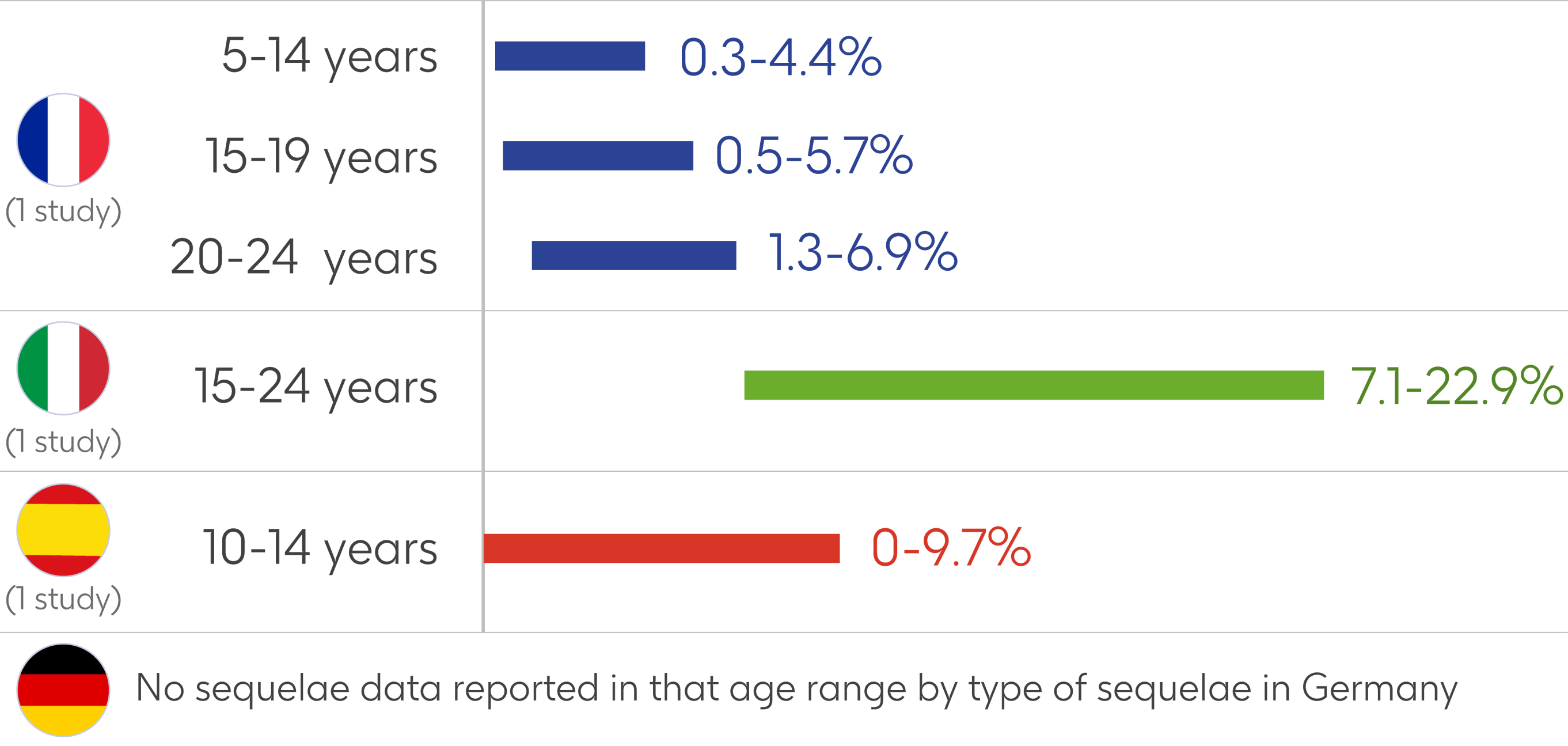


Figure 2: Range of IMD sequelae by type.

⇒ An important proportion of cases result in sequelae in all age groups 10-24 years.



Definitions and reporting periods may vary by study.

Figure 3: Estimated annual IMD-related costs per patient.

Acute treatment stage per patient (direct)	
France	€9,672-11,538
Germany	€7,374-9,439
Spain	€9,552-10,962
Italy	€7,616-26,352 (hospitalized)
Acute treatment stage (indirect)	
Germany	€301-1,582
Spain	€323-943
Total cost of all sequelae (indirect)	
Germany	€40,656-52,022

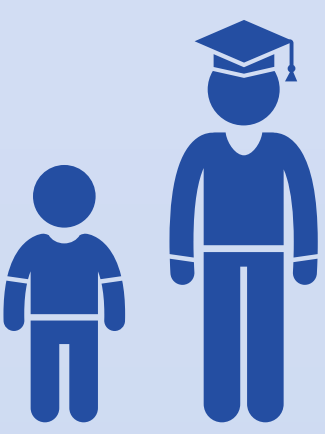
Indirect costs: caregiver burden, productivity loss, premature death, etc. Only including data per patient and for age groups 10-24 years. Year of costs vary by study, some studies did not report cost year.

Data updated post-abstract submission.

For 10–24-year-olds, IMD resulted in **sequelae in 0–23%** (mainly **epilepsy** and **anxiety**) and **death in 0–22%** of cases.

In 10–24-year-olds, acute hospitalisation duration averaged **8–13 days**

Conclusions



A second peak of IMD incidence is observed **among adolescents and young adults**, among whom serogroup B remains dominant.



Individuals who contract IMD are at **risk of severe complications**, which poses a **high financial burden** for their **family, friends and society**.



These findings highlight the **current status of IMD in Europe**, and can be used to inform health strategies.

Abbreviations

IMD: invasive meningococcal disease; **MenA/B/C/W/Y**: meningococcal serogroup A/B/C/W/Y; n: number

References

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