



# ASEAN BIOLOGICAL THREATS SURVEILLANCE CENTRE

## DISEASE ALERT



Korea Disease Control and  
Prevention Agency



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**First alert** : April 28, 2026 | **Meningococcal Disease in Viet Nam**

### Sub-Locations Affected

Nationwide, including localized transmission in Ca Mau Province

### Event Description

As of April 13, 2026, through the Government Electronic Portal, the Ministry of Health of Vietnam has issued a national alert regarding an increase in invasive meningococcal disease. From the beginning of 2026 through mid-April, authorities have recorded 24 confirmed cases, including four deaths, a significant increase compared to the 14 cases reported during the same period in 2025. While cases are distributed sporadically across the country, local clusters have been identified, including in Ca Mau Province, prompting enhanced surveillance and emergency response measures.



Figure 1. Map of Viet Nam

### Epidemiological Information

- On April 13, 2026, the Ministry of Health of Viet Nam issued a national warning following an increase in meningococcal disease cases. From epidemiological weeks 1–14 of 2026, Viet Nam recorded 24 cases, including four deaths. Cases occurred sporadically across multiple localities. This represents an increase compared with 14 cases reported in the same period in 2025.
- Children under 15 years old accounted for 46% of total reported cases.
- From January to April 16, 2026, Dong Thap Province recorded three patients diagnosed with meningococcal meningitis.
- Between April 7 to 9, 2026, Ca Mau Province investigated three suspected meningococcal cases in Cai Tau Prison; two were confirmed and one was negative. One confirmed case died, while the other remained hospitalized. With no additional cases reported over the following ten days, the outbreak in the facility was declared closed on 20 April 2026.

## Response Measures

- Health authorities emphasize high vigilance as the disease remains a dangerous, persistent threat to the population, especially pediatric groups. The illness can progress to fatality within 24 hours; however, initial symptoms are often nonspecific and easily mistaken for common respiratory issues. Recognizing these signs early is vital significantly worsening patient outcomes, as delayed diagnosis frequently leads to the loss of time-sensitive treatment opportunities.
- The Ministry of Health assessed that there remains a risk of continued transmission and occurrence of additional cases, particularly among children and other vulnerable groups.
- Risk communication and community awareness campaigns have been intensified to promote early symptom recognition and prompt healthcare-seeking behavior.

## Recommendations

- The World Health Organization identifies vaccination as the most effective strategy for preventing meningococcal disease and controlling the spread of *Neisseria meningitidis*, particularly in high-risk settings such as areas with low immunization coverage, overcrowding, or conflict. In addition, WHO meningitis guidelines (2025) recommend antibiotic prophylaxis for close contacts of confirmed cases to reduce secondary transmission and support outbreak control.
- The Ministry of Health recommend vaccination as the most effective strategy for the prevention and control of meningococcal disease and reduction of outbreak risk. The public is advised to:
  - a. seek immediate medical care upon recognizing early symptoms, particularly fever, headache, or signs of severe infection,
  - b. adhere to recommended vaccination schedules covering multiple serogroups where applicable,
  - c. maintain personal hygiene practices (including frequent handwashing and respiratory etiquette),
  - d. avoid close contact with suspected or confirmed cases, especially in crowded settings, and
  - e. ensure proper environmental hygiene in high-risk environments such as schools and dormitories.

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