

Recommendations for empiric antimicrobial therapy for purulent meningitis based on patient age and specific predisposing condition*

Predisposing factor	Common bacterial pathogens	Antimicrobial therapy
Age		
<1 month	<i>Streptococcus agalactiae</i> , <i>Escherichia coli</i> , <i>Listeria monocytogenes</i> , <i>Klebsiella</i> species	Ampicillin plus cefotaxime; OR ampicillin plus an aminoglycoside
1-23 months	<i>Streptococcus pneumoniae</i> , <i>Neisseria meningitidis</i> , <i>S. agalactiae</i> , <i>Haemophilus influenzae</i> , <i>E. coli</i>	Vancomycin plus a third-generation cephalosporin•Δ◊
2-50 years	<i>N. meningitidis</i> , <i>S. pneumoniae</i>	Vancomycin plus a third-generation cephalosporin•Δ◊
>50 years	<i>S. pneumoniae</i> , <i>N. meningitidis</i> , <i>L. monocytogenes</i> , aerobic gram-negative bacilli	Vancomycin plus ampicillin plus a third-generation cephalosporin•Δ
Head trauma		
Basilar skull fracture	<i>S. pneumoniae</i> , <i>H. influenzae</i> , group A beta-hemolytic streptococci	Vancomycin plus a third-generation cephalosporin•Δ
Penetrating trauma	<i>Staphylococcus aureus</i> , coagulase-negative staphylococci (especially <i>Staphylococcus epidermidis</i>), aerobic gram-negative bacilli (including <i>Pseudomonas aeruginosa</i>)	Vancomycin plus ceftazidime; OR vancomycin plus meropenem
Postneurosurgery	Aerobic gram-negative bacilli (including <i>P. aeruginosa</i>), <i>S. aureus</i> , coagulase-negative staphylococci (especially <i>S. epidermidis</i>)	Vancomycin plus ceftazidime; OR vancomycin plus meropenem
Immunocompromised state	<i>S. pneumoniae</i> , <i>N. meningitidis</i> , <i>L. monocytogenes</i> , aerobic gram-negative bacilli (including <i>P. aeruginosa</i>)	Vancomycin plus ampicillin plus ceftazidime; OR vancomycin plus ampicillin plus meropenem

* For recommended dosages for adults, see the table "Recommended intravenous dosages of antimicrobial therapy for adults with bacterial meningitis".

• Ceftriaxone or cefotaxime.

◊ Some experts would add rifampin if dexamethasone is also given.

◊ Add ampicillin if meningitis caused by *Listeria monocytogenes* is suspected.

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