

Invasive Meningococcal Disease Monthly Report September 2025

This report summarises invasive meningococcal disease notifications and trends nationally from 1 January to 30 September 2025. Information is based on data recorded in EpiSurv and at PHF Science's Meningococcal Reference Laboratory as at 15 October 2025. Data presented may be further updated and should be regarded as provisional.

Summary

Between 1 January and 30 September 2025:

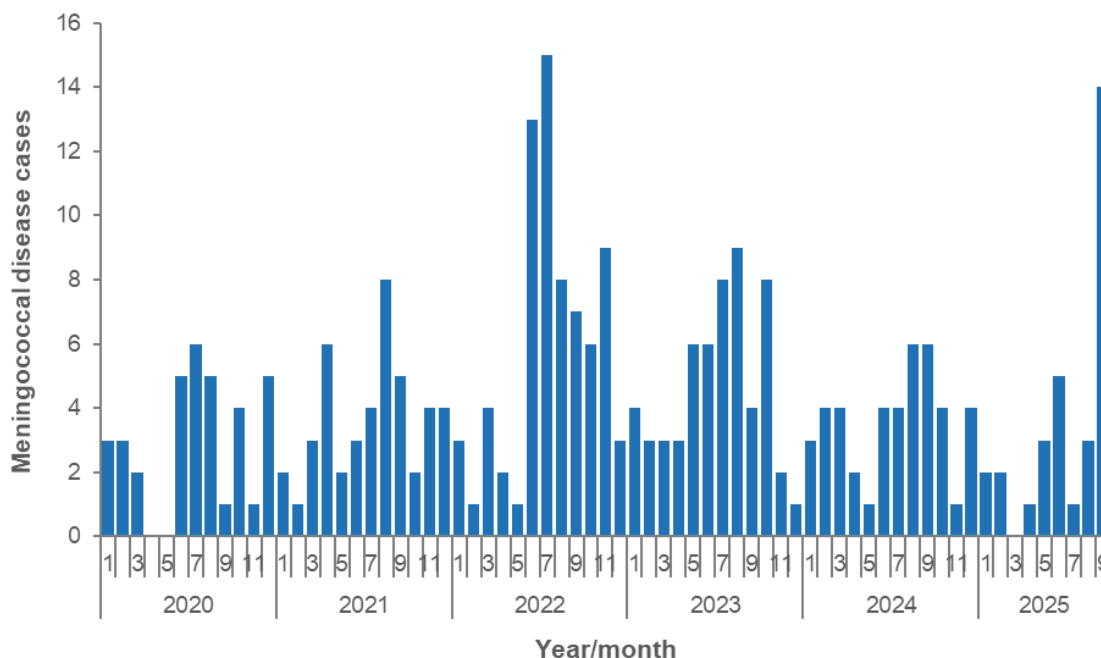
- there were 31 cases (30 confirmed and 1 probable) of invasive meningococcal disease reported. This number is lower than for the same time period in 2020 to 2024;
- there were four deaths in cases aged less than 1 year, 15–19 years, 30–39 years and 70 years and over (1 case each);
- group B was the dominant group type. The group was identified for 24 cases: 18 (75%) were group B, four group Y, one group C and one group W;
- the Northern region reported the highest number of cases (14).

National trends

Between 1 January and 30 September 2025, there were 31 cases (30 confirmed and 1 probable) of meningococcal disease reported. There were four deaths in cases aged less than 1 year, 15–19 years, 30–39 years and 70 years and over. Two deaths were due to group B (PorA types P1.7-12,14 and P1.22,14), one was due to group Y and one had no group detected.

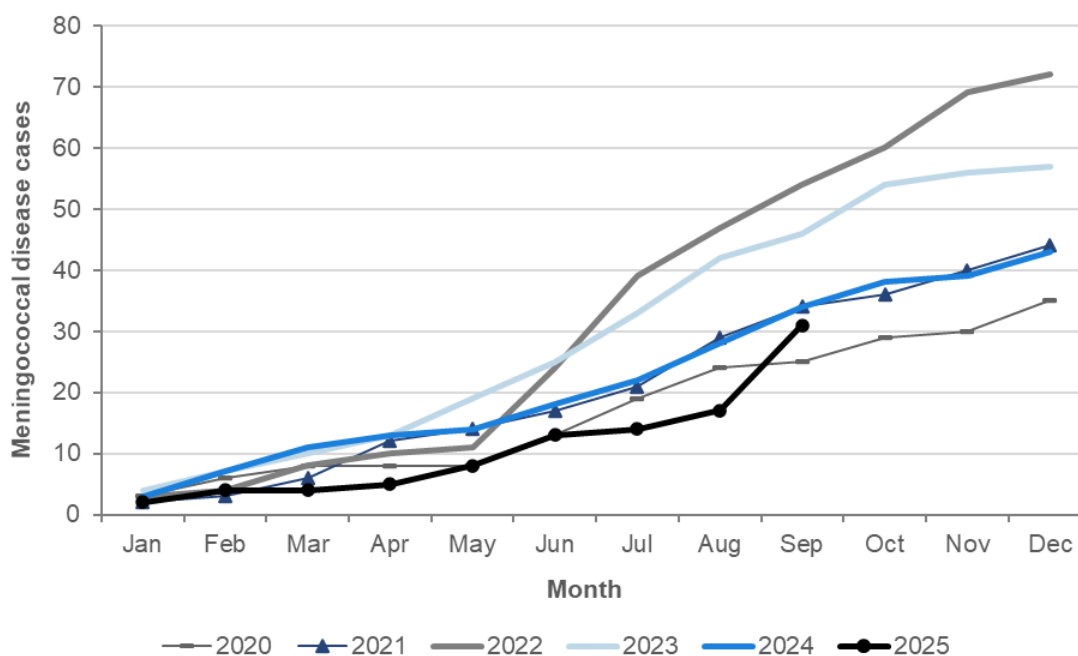
In New Zealand, meningococcal disease follows a seasonal pattern with case numbers typically peaking in winter and continuing into spring (Figure 1). In 2025, case numbers were low in winter but have increased in early spring, with 14 cases notified during September.

Figure 1. Number of meningococcal disease cases by month and year, January 2020 to September 2025



The total number of cases in 2025 to date is similar to the same period in 2021 and 2024, higher than in 2020, and lower than in 2022 and 2023 (Figure 2).

Figure 2. Cumulative number of meningococcal disease cases by month, January 2020 to September 2025

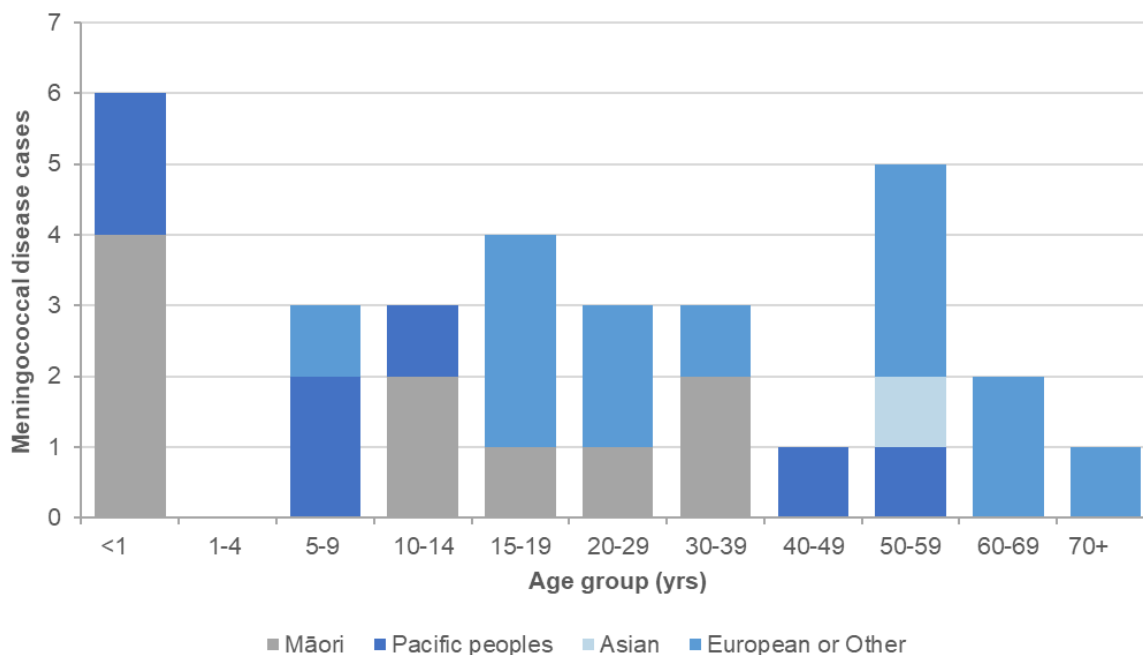


Meningococcal disease by ethnic group and age group

Over half (55%) of the meningococcal disease cases in 2025 to date were Māori (10 cases, 32%) or Pacific peoples (7 cases, 23%).

Of the six cases aged under 5 years, four were Māori and two were Pacific peoples. For those aged 15–29 years, 71% (5/7) were European or Other and 29% (2/7) were Māori (Figure 3).

Figure 3. Number of meningococcal disease cases by prioritised ethnicity and age group, 1 January to 30 September 2025

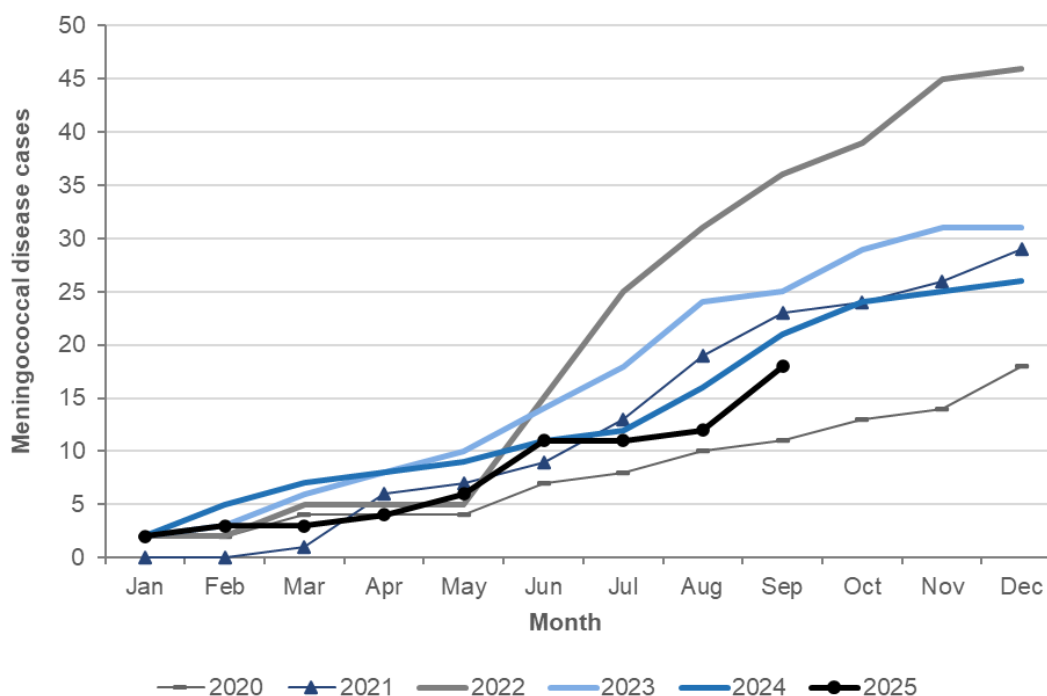


Meningococcal disease by group

The group was identified in 24 (77%) of the 31 confirmed cases notified from 1 January to 30 September 2025. Group B was the dominant group type accounting for 18 (75%) cases. Four (17%) cases were group Y, one was group C and one was group W.

For group B cases, the number of cases in 2025 to date is higher than for the same period in 2020, and lower than in 2021 to 2024 (Figure 4).

Figure 4. Cumulative number of group B meningococcal disease cases by month, January 2020 to September 2025



The number of cases due to group Y in 2025 to date (4 cases) is higher than for the same period in 2020 (2 cases) and 2021 (1 case), the same as in 2023 (4 cases), and lower than the same period in 2022 and 2024 (5 cases each).

The number of group W cases in 2025 to date (1 case) is lower than for the same period in 2020 to 2024 (2–9 cases).

There has been one case of group C in 2025. The last group C case in New Zealand was in 2020.

Meningococcal disease by district and group

The highest number of meningococcal cases in 2025 to date was reported from the Northern region (14 cases) (Table 1).

**Table 1. Number of meningococcal disease cases by group and district,
1 January to 30 September 2025**

District / Region	Group				Group unknown ¹	Total
	B	Y	W	C		
Northern Te Tai Tokerau	6	2	0	1	5	14
Northland	0	0	0	0	0	0
Waitemata	1	2	0	0	1	4
Auckland	3	0	0	1	2	6
Counties Manukau	2	0	0	0	2	4
Midland Te Manawa Taki	6	1	0	0	0	7
Waikato	2	0	0	0	0	2
Lakes	0	0	0	0	0	0
Bay of Plenty	1	0	0	0	0	1
Tairāwhiti	0	0	0	0	0	0
Taranaki	3	1	0	0	0	4
Central Te Ikaroa	5	1	1	0	0	7
Hawke's Bay	1	0	0	0	0	1
Whanganui	0	0	0	0	0	0
MidCentral	1	1	1	0	0	3
Hutt Valley	0	0	0	0	0	0
Capital & Coast	3	0	0	0	0	3
Wairarapa	0	0	0	0	0	0
South Island Te Waipounamu	1	0	0	0	2	3
Nelson Marlborough	0	0	0	0	1	1
West Coast	0	0	0	0	0	0
Canterbury	1	0	0	0	1	2
South Canterbury	0	0	0	0	0	0
Southern	0	0	0	0	0	0
Total	18	4	1	1	7	31

¹ Includes non-groupable and confirmed cases where a sample was not received by PHF Science

Group B PorA type trends

Table 2 shows the trends in selected group B PorA types since 2020. The PorA types included in the table are those detected to date in 2025 as well as those that were most common in previous years.

Five different PorA types were identified among the 18 group B cases in 2025 to date, and these were geographically dispersed.

The most common PorA type in 2025 to date is B:P1.7-12,14.

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, 2020 to September 2025

PorA type	Year					
	2020	2021	2022	2023	2024	2025 ¹
P1.7-12,14	3	12	14	11	10	10
P1.22,14	0	2	2	4	5	3
P1.7-2,4	9	8	14	8	4	3
P1.7-1,1	0	0	0	0	0	1
P1.7-36,14	2	0	2	0	0	1
P1.7-12,14-80	0	0	0	0	1	0
P1.22-21,14	0	0	0	0	1	0
P1.18-1,3	0	0	1	0	1	0
P1.7-2,16-53	0	0	0	0	1	0
P1.20,23-3	0	0	0	0	1	0
P1.19-1,15	0	0	1	2	0	0
P1.22,14-49	0	0	0	2	0	0
P1.7,16-26	0	1	2	1	1	0
P1.19,15	1	1	0	1	0	0
P1.7,4-46	0	0	0	1	0	0
P1.18-1,30-8	0	0	0	1	0	0
P1.18-1,34	0	0	2	0	0	0
P1.5,2	0	1	1	0	0	0
P1.7-13,14	0	0	1	0	0	0
P1.17,16-3	1	1	0	0	0	0
P1.7,16-53	0	1	0	0	0	0
P1.5-2,10-1	0	1	0	0	0	0
P1.22,9	0	1	0	0	0	0

¹ Data to 30 September 2025